

N C Department of Labor Elevator Bureau 1101 Mail Service Center, Raleigh, NC 27699-1101

INSPECTION REPORT

IMPORTANT: Always use State Number in any correspondence relating to your equipment www.nclabor.com/elevator.htm 919-707-7927 Report Number 15075-36-0084 State Number 29662

1

	I	EQUIPMENT INSPECTED		
State Number: 29662	Type of Unit: I	Passenger	Floor to Floor: 1 t	To 3
Capacity: 5000	Manuf: TKE Installed: 03/16/2015		Speed: 135 Rope Size:	
Landings: 3				
Volts: 208	Complied: 03/16/2015		Entrances: 1	
OWNER		OCCUPANT		
COMPASS POINTE CENTER LLC	C COMPASS POINTE STORAGE CAR 1			
POBOX 10	HWY 119			
WHITSETT, NC, 27377		MEBANE, NC, 2730	2	
	IN	SPECTION INFORMATION		
Inspection Date 03/16/2015	Type Inspection New	Certificate Status Not Issued	Inspector 36 - Kirkman	County ALAMANCE
		VIOLATIONS		
Notify the Elevator Bureau in writing omplainace with current codes.	on Corrected Violations Form	when the following corrections		ng your equipment into
	o make changes to the invoice mailing address please call: 919-733-0372			
THIS IS NOT AN INVOICE An	invoice will be mailed to:	COMPASS POINTE CE P O BOX 10 WHITSETT NC 27377		