



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
15089-36-4055
State Number
27172

EQUIPMENT INSPECTED

State Number: 27172	Type of Unit: Passenger	Floor to Floor: 1 to 3
Capacity: 2500	Manuf: TKE	Speed: 150
Landings: 3	Installed: 09/23/2009	Rope Size:
Volts: 460	Complied: 09/23/2009	Entrances: 1
OWNER	OCCUPANT	
HOSPICE & PALLIATIVE CARE CENTER	HOSPICE & PALLIATIVE CARE CENTER	
918 CHAPEL HILL ROAD	918 CHAPEL HILL ROAD	
BURLINGTON, NC, 27215	BURLINGTON, NC, 27215	

INSPECTION INFORMATION

Inspection Date 03/30/2015	Type Inspection Routine	Certificate Status Re-issued	Inspector 36 - Kirkman	County ALAMANCE
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1

VIOLATIONS

none found

Notify the Elevator Bureau in writing on Corrected Violations Form when the following corrections have been made in order to bring your equipment into compliance with current codes.

Violations pointed out to: SHARON TERRELL 336-532-0100

Inspector _____

THIS IS NOT AN
INVOICE

To make changes to the invoice mailing address please call: 919-733-0372

An invoice will be mailed to:

HOSPICE & PALLIATIVE CARE CENTER
918 CHAPEL HILL ROAD
BURLINGTON, NC, 27215