

Violations pointed out to: RACHEL

THIS IS NOT AN

INVOICE

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 15243-48-4642 State Number 28994

		EQUIPMENT INSPECTED			
State Number: 28994 Type of Uni		: Passenger	Floor to Floor	: 1 to 2	
Capacity: 4500 Manuf: TKE		3	Speed: 125		
Landings: 2 Installed: 01/27/2014		/27/2014	Rope Size:		
olts: 460 Complied:			Entrances: 1		
OWNER	OCCUPANT				
TOWN OF LELAND NEW TOWN			POLICE HQ		
102 TOWN HALL DRIVE 102 TOWN HALL D		HALL DRIVE			
LELAND, NC, 28451 LELAND		C, 28451			
		INSPECTION INFORMATION			
Inspection Date 08/31/2015	Type Inspection Routine	Certificate Status Re-issued	Inspector 48 - Martin	County BRUNSWICK	
		VIOLATIONS			
Items must be corrected by: (otify the Elevator Bureau in wromplainace with current codes.)		m when the following corrections	Elevator Name: # 1 ng corrections have been made in order to bring your equipment into		

TOWN OF LELAND

102 TOWN HALL DRIVE LELAND, NC, 28451

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

An invoice will be mailed to:

Inspector ___