



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](http://www.nclabor.com/elevator.htm)  
919-707-7927

Report Number  
**15260-48-5769**  
State Number  
**6853**

EQUIPMENT INSPECTED

State Number: <b>6853</b>	Type of Unit: Passenger	Floor to Floor: 1 to 2
Capacity: 4000	Manuf: WESTBROOK	Speed: 100
Landings: 2	Installed: 11/10/1970	Rope Size:
Volts: 240	Complied: 11/16/1970	Entrances: 1

OWNER

BLADEN COUNTY HOSPITAL  
PO BOX 398  
ELIZABETHTOWN, NC, 28337

OCCUPANT

BLADEN COUNTY HOSPITAL  
HIGHWAY 701 SOUTH  
ELIZABETHTOWN, NC, 28337

INSPECTION INFORMATION

Inspection Date 09/17/2015	Type Inspection Alteration	Certificate Status Not Issued	Inspector 48 - Martin	County BLADEN
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9

VIOLATIONS

N/A FAILED DUE TO NOT BEING READY

Elevator Name: #1

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: JEREMY

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:

BLADEN COUNTY HOSPITAL  
PO BOX 398  
ELIZABETHTOWN, NC, 28337