

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 15300-48-2963 State Number H2701

	E	QUIPMENT INSPECTED		
State Number: H2701 Type of Unit: Hand Lift Capacity: 750 Manuf: GARAVENTA Landings: 2 Installed: 10/27/2015		Hand Lift	Floor to Floor:	1 to 2
		7/2015		
Volts: 120	Complied: 10/2	27/2015	Entrances: 2	
OWNER		OCCUPANT		
BRADFORD PRDUCTS BRADFORD PRDUCTS				
2101 ENTERPRISE DRIVE		2101 ENTERPRISE DRIVE LELAND, NC, 28451		
LELAND, NC, 28451				
	INS	PECTION INFORMATION		
Inspection Date 10/27/2015	Type Inspection New	Certificate Status Issued	Inspector 48 - Martin	County BRUNSWICK 10
		VIOLATIONS		
Elevator Name: # 1				
Notify the Elevator Bureau in wr complainace with current codes.	iting on Corrected Violations Form w	when the following corrections	have been made in order to	bring your equipment into
Violations pointed out to: KEITH PAGE				
THIS IS NOT AN INVOICE	To make changes to the invoice mailing address please call: 919-733-0372 BRADFORD PRDUCTS			
	An invoice will be mailed to:	2101 ENTERPRISE DR LELAND, NC. 28451		