



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  
**16049-36-3065**  
State Number  
**H546**

EQUIPMENT INSPECTED

State Number: <b>H546</b>	Type of Unit: Hand Lift	Floor to Floor: 1 to 2
Capacity: 750	Manuf: CONCORD	Speed: 10
Landings: 2	Installed: 11/23/1994	Rope Size:
Volts: 220	Complied: 11/23/1994	Entrances: 2
OWNER	OCCUPANT	
ELON UNIVERISTY	MOSELEY CENTER ( HANDICAP LIFT)	
803 HAGGRD AVENUE	100 CAMPUS DR	
ELON, NC, 27244	ELON, NC, 27244	

INSPECTION INFORMATION

Inspection Date 02/18/2016	Type Inspection Routine	Certificate Status Re-issued	Inspector 36 - Kirkman	County ALAMANCE
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VIOLATIONS

None foun

Elevator Name: Handi cap lift mosley

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

Violations pointed out to: Bob Willis 336.278.2000

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:

ELON UNIVERISTY  
803 HAGGRD AVENUE  
ELON, NC, 27244