

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 16090-36-0913 State Number 21190

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	Е	QUIPMENT INSPECTED			
State Number: 21190 Type of Unit: F		assenger	Floor to Floor: 1 to 3		
Capacity: 2100 Manuf: SCHINDLER			Speed: 100		
Landings: 3	• •			Rope Size: 0	
Volts: 480	Complied: 09/2	6/2002	Entrances: 1		
OWNER		OCCUPANT			
BELLMONT UNITED MET	THODIST	BELLMONT UN	ITED METHODIST		
4039 MARKWOOD DRIVE		4039 MARKWOOD DRIVE			
BURLINGTON, NC, 27215		BURLINGTON, NC, 27215			
	INS	SPECTION INFORMATION			
Inspection Date 03/30/2016	Type Inspection Compliance	Certificate Status Issued	Inspector 36 - Kirkman	County ALAMANCE	
		VIOLATIONS			
	writing on Corrected Violations Form v	when the following corrections	have been made in order to bri	ng your equipment into	
complainace with current codes. Violations pointed out to: Jerry Jackson,336-227-4163			Inspector		
	To make changes to the invoice ma	iling address please call: 919-7	33-0372		
THIS IS NOT AN INVOICE	BELLMONT UNITED METHODIST An invoice will be mailed to: 4039 MARKWOOD DRIVE				

4039 MARKWOOD DRIVE BURLINGTON, NC, 27215

An invoice will be mailed to: