

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 16188-65-3923 State Number 28117

6

	EQUI	IPMENT INSPECTED			
State Number: 28117	Type of Unit: Passer	nger	Floor to Floor: 1 to 3		
Capacity: 2100	Manuf: TKE		Speed: 100		
Landings: 3	Installed: 04/05/201	2	Rope Size:		
Volts: 208	Complied:		Entrances: 1		
OWNER	OCC	CUPANT			
AVERY CO HUMANE SOCIETY I	NC AVI	AVERY CO HUMANE SOCIETY SHELTER/OFFICE			
P O BOX 1213	279	279 NEW VALE ROAD			
NEWLAND, NC, 28657	NEV	WLAND, NC, 28657			
	INSPEC	CTION INFORMATION			
Inspection Date 07/06/2016	Type Inspection Routine	Certificate Status Re-issued	Inspector 65 - Kelley	County AVERY	
		VIOLATIONS			
Notify the Elevator Bureau in writing o omplainace with current codes.	n Corrected Violations Form when	the following corrections have b	een made in order to bring your	equipment into	
Violations pointed out to: Avery Count			Inspector		
To m	make changes to the invoice mailing address please call: 919-733-0372				
THIS IS NOT AN INVOICE An ir	voice will be mailed to:	AVERY CO HUMANE SOCII P O BOX 1213 NEWI AND NC 28657	ETY INC		