

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 16189-48-5189 State Number 14064

		EQUIPMENT INSPECTED			
State Number: 14064 Type of Unit: Passenger Capacity: 2000 Manuf: KONE Landings: 2 Installed: 08/15/1990 Volts: 460 Complied: 09/07/1990		nit: Passenger Floor to		o Floor: 1 to 2	
			Speed: 80		
		/15/1990	Rope Size:		
			Entrances: 1		
OWNER	•	OCCUPANT			
BRUNSWICK COMMUNITY COLLEGE PO BOX 30		BRUNSWICK COMMUNITY COLLEGE			
			2050 ENTERPRISE DRIVE		
SUPPLY, NC, 28462		LELAND, NC, 28451			
		INSPECTION INFORMATION			
Inspection Date 07/07/2016	Type Inspection Routine	Certificate Status Re-issued	Inspector 48 - Martin	County BRUNSWICK	
		VIOLATIONS			
Items must be corrected by: 09/07/2016			Elevator Name: # 1		
otify the Elevator Bureau in womplainace with current codes	riting on Corrected Violations Form.	m when the following corrections	have been made in order to	bring your equipment into	
/iolations pointed out to: MARILYN			Inspector		
		mailing address please call: 919-7			
THIS IS NOT AN INVOICE	An invoice will be mailed to:	BRUNSWICK COMMU PO BOX 30 SUPPLY, NC, 28462			