

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 16195-65-4522 State Number 22268

	EQUIP	MENT INSPECTED		
State Number: 22268	Type of Unit: Passeng	er	Floor to Floor: 1 to 3	
Capacity: 2500 Manuf: KONE Landings: 3 Installed: 03/16/20		Speed: 100		
Volts: 208	Complied: 03/16/2004	D04 Entrances: 1		
OWNER		OCCUPANT		
NORTHWESTERN REGIO	ONAL HOUSING	ELK PARK A	PARTMENTS	
P.O. BOX 2510		256 ELK PARK SCHOOL ROAD		
BOONE, NC, 28607		ELK PARK, NC, 28622		
	INSPECT	ION INFORMATION		
Inspection Date 07/13/2016	Type Inspection Routine	Certificate Status Re-issued	Inspector 65 - Kelley	County AVERY 6
		/IOLATIONS		
	metal tag in the machine room with all pertine			
Items must be corrected b	y: 09/13/2016			
Notify the Elevator Bureau in complainace with current code	writing on Corrected Violations Form when thes.	ne following corrections have been	en made in order to bring you	r equipment into
•	oody / Maintenance 828-733-1546		Inspector	
	To make changes to the invoice mailing ac			
THIS IS NOT AN INVOICE	An invoice will be mailed to:	NORTHWESTERN REGIONA P.O. BOX 2510 BOONE, NC, 28607	L HOUSING	