



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
16200-65-3748
State Number
23443

EQUIPMENT INSPECTED

State Number: 23443	Type of Unit: Passenger	Floor to Floor: 1 to 2
Capacity: 2500	Manuf: THYSSEN KRUPP	Speed: 95
Landings: 2	Installed: 12/07/2005	Rope Size:
Volts: 208	Complied: 01/05/2006	Entrances: 1
OWNER	OCCUPANT	
ALLERGY PARTNERS CORP	1985 HENDESONVILLE RD. LOT 4	
PO BOX 2407	1985 HENDERSONVILLE RD	
SKYLAND, NC, 28776	ASHEVILLE, NC, 28803	

INSPECTION INFORMATION

Inspection Date 07/18/2016	Type Inspection Routine	Certificate Status Re-issued	Inspector 65 - Kelley	County BUNCOMBE	11 B
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VIOLATIONS

- 8.1.1 Provide the machine room keys on the premises.
- 8.6.4.7.1 Clean the elevator pit.
- 8.6.4.8.1 Clean the elevator machine room.
- 8.6.4.13.1[a] Properly maintain hoist way door interlocks or mechanical locks and electric contacts
- 8.6.1.6.5 Provide the required fire extinguisher in the machine room. Current extinguisher is missing the test tag.
- 8.6.5.5.1 Where valves and cylinders use packing glands or seals, they shall be examined and maintained to prevent excessive loss of fluid.

Items must be corrected by: 09/18/2016

Elevator Name: 1

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

Violations pointed out to: Spake Real Estate 828-277-1300

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:

ALLERGY PARTNERS CORP
PO BOX 2407
SKYLAND, NC, 28776