



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
16201-36-5596
State Number
11988

EQUIPMENT INSPECTED

| | | |
|----------------------------|-------------------------|------------------------|
| State Number: 11988 | Type of Unit: Passenger | Floor to Floor: 1 to 2 |
| Capacity: 2100 | Manuf: THYSSEN KRUPP | Speed: 100 |
| Landings: 2 | Installed: 11/12/1986 | Rope Size: |
| Volts: 208 | Complied: 12/08/1986 | Entrances: 1 |
| OWNER | OCCUPANT | |
| TAR HEEL DRUG COMPANY | TAR HEEL DRUG COMPANY | |
| 316 S MAIN ST | 316 S MAIN ST | |
| GRAHAM, NC, 27253 | GRAHAM, NC, 27253 | |

INSPECTION INFORMATION

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|-------------------------------|----------------------------|---------------------------------|---------------------------|--------------------|
| Inspection Date 07/19/2016 | Type Inspection Routine | Certificate Status Re-issued | Inspector 36 - Kirkman | County ALAMANCE |
|-------------------------------|----------------------------|---------------------------------|---------------------------|--------------------|

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VIOLATIONS

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: chris t 336-227-2093

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:

TAR HEEL DRUG COMPANY
316 S MAIN ST
GRAHAM, NC, 27253