

THIS IS NOT AN

INVOICE

An invoice will be mailed to:

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 16229-48-2271 State Number H1506

	EQUI	PMENT INSPECTED			
State Number: H1506	Type of Unit: Hand Lift		Floor to Floor: 1 to 2		
Capacity: 750	Manuf: SAVARIA		Speed: 25		
Landings: 2	Installed: 03/22/2005		Rope Size:		
Volts: 110	Complied: 03/22/2	005	Entrances: 2		
OWNER	OCCUPANT				
BLADEN CO. SCHOOLS	WEST BLADEN HS PB#4				
PO BOX 2519	1600 NC HWY 410				
ELIZABETHTOWN, NC, 28337		BLADENBORO, NC, 28320			
	INSPEC	CTION INFORMATION			
Inspection Date 08/16/2016	Type Inspection Routine	Certificate Status Re-issued	Inspector 48 - Martin	County BLADEN	
		VIOLATIONS			
8.6.4.7.1	Clean the elevator pit.				
3.6.4	Clean inside unit				
Items must be corrected by: 10/16/	2016				
lotify the Elevator Bureau in writing complainace with current codes.	on Corrected Violations Form when	the following corrections have	been made in order to bring yo	our equipment into	
Violations pointed out to: J.R.			Inspector		
То п	nake changes to the invoice mailing	address please call: 919-733-03	 372		

BLADEN CO. SCHOOLS PO BOX 2519

ELIZABETHTOWN, NC, 28337