

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 16326-7-4212 State Number 19182

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	Е	QUIPMENT INSPECTED			
State Number: 19182 Capacity: 300	Type of Unit: Dui Manuf: ATLAS		Floor to Floor: 1 to 2 Speed: 50		
Landings: 2	Installed: 02/28/2000		Rope Size: 1/4"		
Volts: 230	Complied: 02/28/	2000	Entrances: 1		
OWNER		OCCUPANT			
SKYLINE TELEPHONE		SKYLINE TELEPHONE			
PO BOX 759		1079 NC HWY 194 N			
WEST JEFFERSON, NC, 28694		WEST JEFFERSON, NC, 28694			
	INS	PECTION INFORMATION			
Inspection Date 11/21/2016	Type Inspection Routine	Certificate Status Re-issued	Inspector 7 - Hoffman	County ASHE	
		VIOLATIONS			
lotify the Elevator Bureau in writing omplainace with current codes.	ng on Corrected Violations Form w	when the following corrections have bee	n made in order to bring your e	quipment into	
iolations pointed out to: skyline t			Inspector		
Т		make changes to the invoice mailing address please call: 919-733-0372			
THIS IS NOT AN INVOICE	An invoice will be mailed to:	SKYLINE TELEPHONE PO BOX 759 WEST JEFFERSON, NC, 28694			