

THIS IS NOT AN

INVOICE

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 17013-73-2665 State Number 18738

		I	EQUIPMENT INSPECTED			
State Number: 18738 Capacity: 2100		Type of Unit: Passenger Manuf: THYSSEN KRUPP		Floor to Floor: 1 to 3 Speed: 110		
Landings: 3		Installed: 11/17/1999		Rope Size:		
Volts: 208		Complied: 11/17/1999		Entrances: 1		
OWNER			OCCUPANT			
ELON UNIVERSITY		MOONEY ED BLDG				
803 HAGGARD AVE		200 E LEBANON AVE				
ELON, NC, 27244			ELON, NC, 27244			
		IN	SPECTION INFORMATION			
Inspection Date 01/13/2017		Type Inspection Routine	Certificate Status Re-issued	Inspector 73 - James	County ALAMANCE	
			VIOLATIONS			
2.2.5.1	Put the pi	t lights in proper working order.				
8.6		the elevator pit				
8.6	Provide proper certificate frame					
8.6 Machine room not to be used for storage						
Items must b	be corrected by: 0	3/13/2017	Elevator	r Name: Mooney BDLG		
Notify the Elevar complainace with	tor Bureau in writ h current codes.	ing on Corrected Violations Form	when the following corrections have	re been made in order to bri	ng your equipment into	
Violations pointed out to: Jeremy Lloyd				Inspector		

ELON UNIVERSITY

803 HAGGARD AVE

ELON, NC, 27244

To make changes to the invoice mailing address please call: 919-733-0372

An invoice will be mailed to: