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
17033-48-1618
State Number
27419

EQUIPMENT INSPECTED

State Number: **27419**	Type of Unit: Passenger	Floor to Floor: 1 to 4
Capacity: 4500	Manuf: OTIS	Speed: 125
Landings: 4	Installed: 02/17/2011	Rope Size:
Volts: 480	Complied: 02/17/2011	Entrances: 2

OWNER
BRUNSWICK NOVANT MEDICAL CENTER
240 HOSPITAL DRIVE NE
BOLIVIA, NC, 28422

OCCUPANT
BRUNSWICK NOVANT MEDICAL CENTER
240 HOSPITAL DRIVE NE
BOLIVIA, NC, 28422

INSPECTION INFORMATION

Inspection Date	Type Inspection	Certificate Status	Inspector	County
02/02/2017	Routine	Re-issued	48 - Martin	BRUNSWICK

10

VIOLATIONS

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 complainace with current codes.

Violations pointed out to: BEN [MTCE.] 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:
BRUNSWICK NOVANT MEDICAL CENTER
240 HOSPITAL DRIVE NE
BOLIVIA, NC, 28422