

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 17067-16-2778 State Number 9865

	E	QUIPMENT INSPECTED			
State Number: 9865	tate Number: 9865 Type of Unit: Passen		ger Floor to Floor: 1 to 4		
Capacity: 2500	Manuf: SOUTHERN		Speed: 125		
Landings: 4	Installed: 08/17/1981		Rope Size: 0		
Volts: 208	Complied: 05/12/2003		Entrances: 1		
OWNER			OCCUPANT		
WASHINGTON HOUSING AUTHORITY			EAST HAVEN		
PO BOX 1046			407 E. THIRD STREET		
WASHINGTON, NC, 27889		WA	WASHINGTON, NC, 27889		
	INS	SPECTION INFORMATION			
Inspection Date 03/08/2017	Type Inspection Routine	Certificate Status Re-issued	Inspector 16 - Moore	County BEAUFORT	
		VIOLATIONS			
Items must be corrected by Notify the Elevator Bureau in v	writing on Corrected Violations Form w	when the following corrections have	re been made in order to brin	ng your equipment into	
complainace with current codes	S.	C			
Violations pointed out to: Mai			Inspector		
	To make changes to the invoice mailing address please call: 919-733-0372				
THIS IS NOT AN INVOICE	WASHINGTON HOUSING AUTHORITY An invoice will be mailed to: PO BOX 1046 WASHINGTON, NC, 27889				