



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
17200-48-0851
State Number
H2773

EQUIPMENT INSPECTED

State Number: H2773	Type of Unit: Hand Lift	Floor to Floor: 1 to 2
Capacity: 750	Manuf: SAVARIA	Speed: 20
Landings: 2	Installed: 06/21/2016	Rope Size:
Volts: 115	Complied:	Entrances: 1
OWNER	OCCUPANT	
BRUNSWICK COUNTY	NW WASTE WATER TREATMENT PLANT	
3954 CLEARWELL RD.	3954 CLEARWELL RD.	
LELAND, NC, 28451	LELAND, NC, 28451	

INSPECTION INFORMATION

Inspection Date 07/19/2017	Type Inspection Routine	Certificate Status Re-issued	Inspector 48 - Martin	County BRUNSWICK
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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 compliance with current codes.

Violations pointed out to: KEY

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 COUNTY
3954 CLEARWELL RD.
LELAND, NC, 28451