



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
17206-73-4160
State Number
5117

EQUIPMENT INSPECTED

State Number: 5117	Type of Unit: Freight	Floor to Floor: 1 to 2
Capacity: 2500	Manuf: SOUTHERN	Speed: 50
Landings: 2	Installed: 06/11/1964	Rope Size:
Volts: 575	Complied: 06/11/1964	Entrances: 2
OWNER	OCCUPANT	
CAROLINA HOSIERY MILLS	CAROLINA HOISERY MILLS	
P O BOX 850	327 E ELM ST	
BURLINGTON, NC, 27216	GRAHAM, NC, 27253	

INSPECTION INFORMATION

Inspection Date 07/25/2017	Type Inspection Routine	Certificate Status Re-issued	Inspector 73 - James	County ALAMANCE
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VIOLATIONS

8.6.1.6.2	Empty the drip pan in the machine room.
8.6.5.14.1	Provide the annual relief valve and hydraulic system pressure test.
5.1.21.1	Place the car alarm bell in working order. Minimum level of 80 dBA.

Items must be corrected by: 09/23/2017

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: maintenance

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:

CAROLINA HOSIERY MILLS
P O BOX 850
BURLINGTON, NC, 27216