

INVOICE

An invoice will be mailed to:

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 17208-73-0169 State Number 819

	EQUII	PMENT INSPECTED		
State Number: 819	Type of Unit: Freight		Floor to Floor: 1 to 2	<u> </u>
Capacity: 2000	Manuf: MONARCH		Speed: 50	
Landings: 2	Installed: 01/21/1947		Rope Size: 1/2	
Volts: 220	Complied: 01/21/1947		Entrances: 2	
OWNER		OCCUPANT		
THE GLASS ANGEL	THE GLASS ANGEL			
224 EAST FRONT STREET	224 EEAST FRONT ST			
BURLINGTON, NC, 27215		BURLINGTON, NC, 27215		
	INSPEC	TION INFORMATION		
Inspection Date 07/27/2017	Type Inspection Routine	Certificate Status Re-issued	Inspector 73 - James	County ALAMANCE
		VIOLATIONS		
lotify the Elevator Bureau in writionplainace with current codes.	ng on Corrected Violations Form when	the following corrections ha	we been made in order to bri	ng your equipment into
iolations pointed out to: theglass	angel@bellsouth.net		Inspector	
,	Γο make changes to the invoice mailing	address please call: 919-733	3-0372	
THIS IS NOT AN		THE GLASS ANGEL		

224 EAST FRONT STREET BURLINGTON, NC, 27215