

THIS IS NOT AN 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 17229-48-1379 State Number 25517

		EQUIPMENT INSPECTED			
State Number: 25517 Capacity: 2100	Type of Unit Manuf: OTI	•	Floor to Floor: 1 to 2 Speed: 100		
Installed: 06/03/2008 olts: 208 Complied: 06/03/2008		5/03/2008	Rope Size: Entrances: 1		
		06/03/2008			
OWNER		OCCUPANT			
ST JAMES SQUARE OPCA		ST JAMES OFFI	T JAMES OFFICE BLDG		
4330 SOUTHPORT SUPPLY RO	OAD	4332 SOUTHPO	4332 SOUTHPORT/SUPPLY RD SE		
SOUTHPORT, NC, 28461		SOUTHPORT, NC, 28461			
		INSPECTION INFORMATION			
Inspection Date 08/17/2017	Type Inspection Routine	Certificate Status Re-issued	Inspector 48 - Martin	County BRUNSWICK	
		VIOLATIONS			
Elevator Name: BLDG 2					
	ing on Corrected Violations For	m when the following corrections	have been made in order to	b bring your equipment into	

ST JAMES SQUARE OPCA 4330 SOUTHPORT SUPPLY ROAD SOUTHPORT, NC, 28461