



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
17276-73-3276
State Number
5337

EQUIPMENT INSPECTED

State Number: 5337	Type of Unit: Passenger	Floor to Floor: 1 to 2
Capacity: 1000	Manuf: SOUTHERN	Speed: 75
Landings: 2	Installed: 07/30/1965	Rope Size:
Volts: 220	Complied: 09/28/1965	Entrances: 1
OWNER	OCCUPANT	
SUE-LYNN INC	SUE-LYNN INC	
BOX 939	BOX 939	
HAW RIVER, NC, 27258	HAW RIVER, NC, 27258	

INSPECTION INFORMATION

Inspection Date 10/03/2017	Type Inspection Routine	Certificate Status Re-issued	Inspector 73 - James	County ALAMANCE
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1

VIOLATIONS

8.6.5.14.1 Provide the annual relief valve and hydraulic system pressure test.

Items must be corrected by: 12/02/2017

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: sue-lynn@neypath.net

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:

SUE-LYNN INC
BOX 939
HAW RIVER, NC, 27258