

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 17305-65-1990 State Number 30583

| | EQ | QUIPMENT INSPECTED | | | |
|--|---|--|--------------------------------|------------------|--|
| State Number: 30583 Type of Unit: | | ssenger | Floor to Floor: 1 to 2 | | |
| Capacity: 2100 | Manuf: CANTO | | Speed: 100 | | |
| Landings: 2 Installed: 06/ | | 2016 | Rope Size: | | |
| Volts: 208 | Complied: | | | Entrances: 1 | |
| OWNER | | OCCUPANT | | | |
| GRANDFATHER MOUNTAIN COUNTRY CLUB | | GRANDFATHER MTN COUNTRY CLUB FITNESS CTR | | | |
| 2120 NC HWY 105 SOUTH | | 2120 NC HWY 105 SOUTH | | | |
| LINVILLE, NC, 28646 | | LINVILLE, NC, 28646 | | | |
| | INSI | PECTION INFORMATION | | | |
| Inspection Date 11/01/2017 | Type Inspection Routine | Certificate Status Re-issued | Inspector 65 - Kelley | County AVERY | |
| | | VIOLATIONS | | | |
| | | | | | |
| Items must be corrected by: | 12/31/2017 | | | | |
| Notify the Elevator Bureau in w complainace with current codes | riting on Corrected Violations Form w | hen the following corrections have b | een made in order to bring you | r equipment into | |
| Violations pointed out to: Davi | d McGuire 828-898-4531 | | Inspector | | |
| | To make changes to the invoice mailing address please call: 919-733-0372 | | | | |
| THIS IS NOT AN INVOICE | GRANDFATHER MOUNTAIN COUNTRY CLUB An invoice will be mailed to: 2120 NC HWY 105 SOUTH LINVILLE, NC, 28646 | | | | |