NCDOL NCDOL N. Department of labor

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 17325-76-3185 State Number 26961

	EQ'	UIPMENT INSPECTED		
State Number: 26961	Type of Unit: Pass	senger	Floor to Floor: 1 to 3 Speed: 150 Rope Size: 0	
Capacity: 2500	Manuf: TKE			
Landings: 3	Installed: 04/01/20	010		
Volts: 208	Complied:		Entrances: 1	
OWNER	0	CCUPANT	CUPANT	
GRANDFATHER MOUNTAIN		RANDFATHER MOUNTAIN TO	SHOP	
P.O. BOX 129	20	2050 BLOWING ROCK HWY		
LINVILLE, NC, 28646	L	INVILLE, NC, 28646		
	INSP	ECTION INFORMATION		
Inspection Date 11/21/2017	Type Inspection Routine	Certificate Status Re-issued	Inspector 76 - Crank	County AVERY
		VIOLATIONS		
8.6.4.9 Clean the car top.				
8.6.4.7 Remove oil from the pi	t floor			
•	on the results of the Phase I and Phase	II operations.		
8.6.5.5.1 When a cylinder packin valve pressure for not le	ng or seal or a pressure piping seal is recess than 15 sec.	eplaced, the integrity of the entire hy	draulic system shall be verifie	ed by operating it at relie
8.6.4.8.2 Articles or materials no spaces and control room	t necessary for the mainternace or opens.	eration of the elevator shall not be st	ored in machinery spaces, mac	hine rooms, control
2.7.3.4.1 Provide a self closing se	elf-locking machine room / space door	r.		
Items must be corrected by: 0	1/20/2018			
Notify the Elevator Bureau in writ complainace with current codes.	ing on Corrected Violations Form who	en the following corrections have be	een made in order to bring you	r equipment into
Violations pointed out to: Jesse 8	28-733-2800		Inspector	
	To make changes to the invoice mailing	ng address please call: 919-733-037	2	
THIS IS NOT AN INVOICE	An invoice will be mailed to:	GRANDFATHER MOUNTAIN P.O. BOX 129 LINVILLE, NC, 28646	N	