



INSPECTION REPORT

IMPORTANT: Always use State Number in
any correspondence relating to your equipment
www.nclabor.com/elevator.htm
919-707-7927

Report Number
17348-73-1832
State Number
29078

EQUIPMENT INSPECTED

State Number: 29078	Type of Unit: Passenger	Floor to Floor: 1 to 3
Capacity: 3500	Manuf: TKE	Speed: 130
Landings: 3	Installed: 12/09/2013	Rope Size:
Volts: 460	Complied:	Entrances: 1
OWNER	OCCUPANT	
ALAMANCE REGIONAL MEDICAL CENTER	ALAMANCE REGIONAL MEDICAL CENTER CAR 2	
1240 HUFFMAN MILL ROAD	1240 HUFFMAN MILL ROAD	
BURLINGTON, NC, 27215	BURLINGTON, NC, 27215	

INSPECTION INFORMATION

Inspection Date 12/14/2017	Type Inspection Routine	Certificate Status Re-issued	Inspector 73 - James	County ALAMANCE
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1

VIOLATIONS

8.6.4.7 Clean the pit and the pit equipment.

Items must be corrected by: 02/12/2018

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: Jim Canada

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:

ALAMANCE REGIONAL MEDICAL CENTER
1240 HUFFMAN MILL ROAD
BURLINGTON, NC, 27215