



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
17353-48-5820
State Number
20301

EQUIPMENT INSPECTED

State Number: 20301	Type of Unit: Passenger	Floor to Floor: 1 to 2
Capacity: 2100	Manuf: OTIS	Speed: 100
Landings: 2	Installed: 07/09/2001	Rope Size:
Volts: 208	Complied: 07/09/2001	Entrances: 1
OWNER	OCCUPANT	
DRS WARD & WILLIAMS	WARD & WILLIAMS DENTAL OFFICE	
PO BOX 607	343 WHITEVILLE RD	
SHALLOTTE, NC, 28459	SHALLOTTE, NC, 28459	

INSPECTION INFORMATION

Inspection Date 12/19/2017	Type Inspection Routine	Certificate Status Re-issued	Inspector 48 - Martin	County BRUNSWICK
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VIOLATIONS

Elevator Name: # 1

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: MGMT.

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:

DRS WARD & WILLIAMS
PO BOX 607
SHALLOTTE, NC, 28459