

THIS IS NOT AN

INVOICE

An invoice will be mailed to:

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 18045-73-0718
State Number 11065

	E	EQUIPMENT INSPECTED		
State Number: 11065 Capacity: 2100 Landings: 2 Volts: 480 OWNER ALAMANCE CO 124 W ELM ST GRAHAM, NC, 27253	Manuf: THYSSEN Installed: 01/15/19 Complied: 01/15/19 OCC HUM 319	Type of Unit: Passenger Manuf: THYSSEN KRUPP Installed: 01/15/1985 Complied: 01/15/1985 OCCUPANT HUMAN SERVICES FACILITIES 319 N GRAHAM / HOPEDALE RD BURLINGTON, NC, 27217		o 1
	INS	SPECTION INFORMATION		
Inspection Date 02/14/2018	Type Inspection Routine	Certificate Status Re-issued	Inspector 73 - James	County ALAMANCE
		VIOLATIONS		
	in-car Emergency Phone in working self closing self-locking machine ro			
Items must be corrected by: 0	03/16/2018			
Notify the Elevator Bureau in wri complainace with current codes.	ting on Corrected Violations Form v	when the following corrections have	ve been made in order to bring	your equipment into
Violations pointed out to: Joel Brookes 3365706750			Inspector	
	To make changes to the invoice ma	uiling address please call: 919-733-	.0372	

ALAMANCE CO

124 W ELM ST GRAHAM, NC, 27253