

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 18180-79-1724 State Number H1549

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	E	EQUIPMENT INSPECTED			
State Number: H1549	Type of Unit:	Hand Lift	Floor to Floor: 1 to S		
Capacity: 750	Manuf: NATL W-O-V		Speed: 9		
Landings: 2	Installed: 12/02/2004		Rope Size: 0		
Volts: 120	Complied: 12/02/2004		Entrances: 2		
OWNER		OCCUPANT			
BELHAVEN MISSIONARY	BAPTIST	BELHAVEN M	BELHAVEN MISSIONARY BAPTIST		
PO BOX 400		251 EDWARDS	251 EDWARDS ST.		
BELHAVEN, NC, 27810		BELHAVEN, NC, 27810			
	INS	SPECTION INFORMATION			
Inspection Date 06/29/2018	Type Inspection Routine	Certificate Status Re-issued	Inspector 79 - Cumberland	County BEAUFORT	
		VIOLATIONS			
	riting on Corrected Violations Form v	when the following corrections	have been made in order to bring	your equipment into	
omplainace with current codes.			Imamaatan		
iolations pointed out to: main			Inspector		
THIS IS NOT AN	To make changes to the invoice mailing address please call: 919-733-0372				
THIS IS NOT AN INVOICE	An invoice will be mailed to: BELHAVEN MISSIONARY BAPTIST PO BOX 400 BELHAVEN, NC, 27810				