

## 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 18232-73-0158 State Number 25586

	EG	QUIPMENT INSPECTED			
State Number: 25586 Type of Unit: I		assenger Floor to Floor: 1 to 2		to 2	
Capacity: 3500	Manuf: TKE	• • • • • • • • • • • • • • • • • • • •			
Landings: 2	Installed: 03/26/	Installed: 03/26/2008		Rope Size: 0	
Volts: 480	Complied: 03/26	Complied: 03/26/2008		Entrances: 2	
OWNER	occ	UPANT			
CONE HEALTH	CON	CONE HEALTH MEDICAL CENTER MI			
HEALTH SERVICE DIVIS	ION 3940	3940 ARROW HEAD BVLD			
GREENSBORO, NC, 27401 MEBANE, NC, 27302					
	INS	PECTION INFORMATION			
Inspection Date 08/20/2018	Type Inspection Alteration	Certificate Status Issued	Inspector 73 - James	County ALAMANCE	
		VIOLATIONS			
lotify the Elevator Bureau in omplainace with current code	writing on Corrected Violations Form w s.	hen the following corrections have	e been made in order to br	ing your equipment into	
/iolations pointed out to: Jair	ne Davis Thyssen Krupp Elevator		Inspector		
	To make changes to the invoice mailing address please call: 919-733-0372		0372		
THIS IS NOT AN INVOICE	An invoice will be mailed to:	CONE HEALTH HEALTH SERVICE DIVIS	JON		

An invoice will be mailed to:

HEALTH SERVICE DIVISION GREENSBORO, NC, 27401