



INSPECTION REPORT

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

Report Number
18260-42-5932
State Number
14777

EQUIPMENT INSPECTED

State Number: 14777	Type of Unit: Passenger	Floor to Floor: 1 to 3
Capacity: 4000	Manuf: ASK	Speed: 100
Landings: 3	Installed: 10/22/1992	Rope Size:
Volts: 480	Complied: 10/22/1992	Entrances: 1
OWNER	OCCUPANT	
MARIA PARHAM APTS	MARIA PARHAM APTS	
406 S CHESTNUT ST	406 S CHESTNUT ST	
HENDERSON, NC, 27536	HENDERSON, NC, 27536	

INSPECTION INFORMATION

Inspection Date 09/17/2018	Type Inspection Routine	Certificate Status Re-issued	Inspector 42 - Wilson	County VANCE	91
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VIOLATIONS

- 2.14.7.1.3 Place the in-car emergency lights in working order. The auxillary lighting illumination shall not be less than 2 lx (0.2 fc) measured at any point between 48 in. and 35 in. above the car floor and approximately 12 in. centered horizontally in front o
- 8.6.4.13.1 (a) Provide the required maintenance for the hoistway door contacts and interlocks. 1st floor adjust.
- 2.2.4.2 Secure or replace the pit ladder.
- 2.27.1.1.1 Place the in-car Emergency Phone in working order.
- 2.7.9.1 Place the machine room or space lights in working order. 200 lx or 19 fc @ the machine room floor.
- 8.6.5.14.1 Provide the annual relief valve and hydraulic system pressure test. And provide the proper tag on controller.

Items must be corrected by: 11/16/2018

Notify the Elevator Bureau in writing on Corrected Violations Form when the following corrections have been made in order to bring your equipment into complainance with current codes.

Violations pointed out to: Vickey Gill 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: MARIA PARHAM APTS
406 S CHESTNUT ST
HENDERSON, NC, 27536