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
21264-42-1422
State Number
14777

EQUIPMENT INSPECTED

State Number: **14777**
Capacity: 4000
Landings: 3
Volts: 480

Type of Unit: Passenger
Manuf: ASK
Installed: 10/22/1992
Complied: 10/22/1992

Floor to Floor: 1 to 3
Speed: 100
Rope Size:
Entrances: 1

OWNER
MARIA PARHAM APTS
406 S CHESTNUT ST
HENDERSON, NC, 27536

OCCUPANT
MARIA PARHAM APTS
406 S CHESTNUT ST
HENDERSON, NC, 27536

INSPECTION INFORMATION

Inspection Date	Type Inspection	Certificate Status	Inspector	County
09/21/2021	Routine	Re-issued	42 - Wilson	VANCE

91

VIOLATIONS

8.6.5.5.1 Where pressure piping, valves, and cylinders use packing glands or seals, they shall be examined and maintained to prevent excessive loss of fluid. Replace Packing leaking more than 5 gallons in under 90 days.

8.6.5.5.2 Empty the drain bucket in the pit.

Items must be corrected by: 11/20/2021

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

Violations pointed out to: Penny Butler Vance Housing

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