



INSPECTION REPORT

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

Report Number
21340-42-1181
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 12/06/2021	Type Inspection Alteration	Certificate Status Issued	Inspector 42 - Wilson	County 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. Leak at tank in piping when full load pressure applied.

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

Violations pointed out to: Charter Elevator

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