



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
9106-17-427
State Number
16329

EQUIPMENT INSPECTED

State Number: 16329	Type of Unit: Passenger	Floor to Floor: 1 to 2
Capacity: 2100	Manuf: THYSSEN KRUPP	Speed: 100
Landings: 2	Installed: 02/15/1996	Rope Size:
Volts: 208	Complied: 02/15/1996	Entrances: 1
OWNER	OCCUPANT	
MISSION HOSPITAL	MAHEC WOMENS HEALTH CENTER	
509 BILTMORE AVE.	93 VICTORIA AVE	
AHSEVILLE, NC, 28801	AHSEVILLE, NC, 28801	

INSPECTION INFORMATION

Inspection Date 04/16/2009	Type Inspection Routine	Certificate Status Re-issued	Inspector 17 - White	County BUNCOMBE	11 A
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VIOLATIONS

NOTE NO VIOLATIONS

Items must be corrected by: 04/16/2009

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: OFFICE

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:

MISSION HOSPITAL
509 BILTMORE AVE.
AHSEVILLE, NC, 28801