

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 9117-36-033
State Number 1543

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		EQUIPMENT INSPECTED		
State Number: 1543 Type of Unit: Freig		-	Floor to Floor: 1 to 2	
Capacity: 2000	Manuf: WESTBROOK		Speed: 75	
Landings: 2 Volts: 220	Installed: 05/29/1950		Rope Size: 1/2 Entrances: 2	
	Complied: 05/29/1950		Entrances, 2	
OWNER		OCCUPANT ALAMANCE FOODS		
ALAMANCE FOODS PO BOX 2690		739 S WORTH ST		
BURLINGTON, NC, 27216		BURLINGTON, NC, 27215		
	IN	NSPECTION INFORMATION		
Inspection Date 04/27/2009	Type Inspection Routine	Certificate Status Re-issued	Inspector 36 - Kirkman	County ALAMANCE
		VIOLATIONS		
Items must be corrected by: otify the Elevator Bureau in w omplainace with current codes. iolations pointed out to: OFFI	riting on Corrected Violations Form CE	-	Inspector	
-		nailing address please call: 010-7		
THIS IS NOT AN INVOICE	An invoice will be mailed to:	ALAMANCE FOODS PO BOX 2690 BURLINGTON, NC, 27:		