

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 9173-8-5861
State Number H2079

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	E	QUIPMENT INSPECTED			
State Number: H2079	Type of Unit: 1	Hand Lift	Floor to Floor: 1 to 1		
Capacity: 750 Manuf: SAVARIA			Speed: 8		
Landings: 2 Installed: 03/04/2009		1/2009	Rope Size:		
Volts: 120 Complied: 03/0		04/2009	Entrances: 2		
OWNER		OCCUPANT			
ANSON COUNTY GOVERNMENT		ANSON COUNTY ADMIN OFB			
101 S GREENE STREET		101 S GREENE STREET			
WADESBORO, NC, 28170		WADESBORO, NC, 28170			
	INS	PECTION INFORMATION			
Inspection Date 06/22/2009	Type Inspection Compliance	Certificate Status Prev Issued	Inspector 8 - Burris	County ANSON	
		VIOLATIONS			
Elevator Name: 2ST FLOOR	LIFT				
Notify the Elevator Bureau in writ omplainace with current codes.	ing on Corrected Violations Form w	then the following corrections have been	made in order to bring your	r equipment into	
Violations pointed out to: REP- JEFF WAISNER			Inspector		
	To make changes to the invoice mailing address please call: 919-733-0372				
THIS IS NOT AN	ANSON COUNTY GOVERNMENT An invoice will be mailed to: 101 S GREENE STREET WADESBORO, NC, 28170				