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
9198-7-4220
State Number
6737

EQUIPMENT INSPECTED

State Number: **6737**
Capacity: 4000
Landings: 4
Volts: 208

Type of Unit: Passenger
Manuf: SOUTHERN
Installed: 08/04/1971
Complied: 08/20/1971

Floor to Floor: B to 3
Speed: 200
Rope Size: 1/2
Entrances: 1

OWNER
ASHE MEMORIAL HOSPITAL
PO BOX 8
JEFFERSON, NC, 28640

OCCUPANT
ASHE MEMORIAL HOSPITAL
HWY 221 N
JEFFERSON, NC, 28640

INSPECTION INFORMATION

Inspection Date	Type Inspection	Certificate Status	Inspector	County
07/17/2009	Routine	Re-issued	7 - Hoffman	ASHE

5

VIOLATIONS

n/a No violations found

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: JOHNNY SPEAKS 336-846-7101 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:
ASHE MEMORIAL HOSPITAL
PO BOX 8
JEFFERSON, NC, 28640