

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 9208-7-3448
State Number H1925

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	EQUIPMEN	T INSPECTED		
State Number: H1925	Type of Unit: Hand Lift		Floor to Floor: 1 to 2	
Capacity: 750	Manuf: NATL W-O-V		Speed: 9	
Landings: 2	Installed: 09/12/2007		Rope Size:	
Volts: 115	Complied: 09/12/2007		Entrances: 2	
OWNER		OCCUPANT		
W JEFFERSON UNITED METHOD	IST CH	W JEFFERSON UNITE	ED METHODIST CH	
107 W 2ND STREET		107 W 2ND STREET		
WEST JEFFERSON, NC, 28694		WEST JEFFERSON, N	WEST JEFFERSON, NC, 28694	
	INSPECTION	INFORMATION		
Inspection Date 07/27/2009	Type Inspection Routine	Certificate Status Re-issued	Inspector 7 - Hoffman	County ASHE
	VIOI	ATIONS		
Notify the Elevator Bureau in writing o complainace with current codes.	n Corrected Violations Form when the fo	llowing corrections have b	een made in order to bring your e	quipment into
_	SON UNITED METHODIST CH. 336-24	16-5292	Inspector	
<u>.</u>				
To make changes to the invoice mailing address please call: 919-733-0372				
THIS IS NOT AN INVOICE An invoice will be mailed to: W JEFFERSON UNITED METHODIST CH 107 W 2ND STREET WEST JEFFERSON, NC, 28694				