

INSPECTION REPORT

IMPORTANT: Always use State Number in
any correspondence relating to your equipment
www.nclabor.com/elevator.htm
919-807-2770

Report Number
9229-16-1484
State Number
H1146

EQUIPMENT INSPECTED

State Number: H1146	Type of Unit: Hand Lift	Floor to Floor: 1 to 2
Capacity: 750	Manuf: ACCESS	Speed: 12
Landings: 2	Installed: 04/18/2001	Rope Size: 0
Volts: 120	Complied: 04/26/2001	Entrances: 2
OWNER	OCCUPANT	
WARREN SMITH	MED EAST COMMISSION	
1385 JOHN SMALL DR	1385 JOHN SMALL DR	
WASHINGTON, NC, 27889	WASHINGTON, NC, 27889	

INSPECTION INFORMATION

Inspection Date 08/17/2009	Type Inspection Routine	Certificate Status Re-issued	Inspector 16 - Moore	County BEAUFORT
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7

VIOLATIONS

2.11.2 Repair telephone to work

Items must be corrected by: 09/16/2009

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: Diane Adams

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:

WARREN SMITH
1385 JOHN SMALL DR
WASHINGTON, NC, 27889