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
9314-36-4178
State Number
21290

EQUIPMENT INSPECTED

State Number: **21290**
Capacity: 2500
Landings: 3
Volts: 480

Type of Unit: Passenger
Manuf: THYSSEN KRUPP
Installed: 06/24/2003
Complied: 06/24/2003

Floor to Floor: 1 to 3
Speed: 160
Rope Size: 0
Entrances: 1

OWNER
VILLAGE @ BROOKWOOD HEALTH
1881 T EDGEWOOD AVE.
BURLINGTON, NC, 27215

OCCUPANT
VILLAGE @ BROOKWOOD HEALTH
1881 T EDGEWOOD AVE.
BURLINGTON, NC, 27215

INSPECTION INFORMATION

Inspection Date	Type Inspection	Certificate Status	Inspector	County
11/10/2009	Routine	Re-issued	36 - Kirkman	ALAMANCE

1

VIOLATIONS

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: office

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:
VILLAGE @ BROOKWOOD HEALTH
1881 T EDGEWOOD AVE.
BURLINGTON, NC, 27215