

## 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 9317-48-2974 State Number H1503

	EQUIP	MENT INSPECTED		
State Number: H1503	Type of Unit: Hand	 Lift	Floor to Floor: 1 to 2	
Capacity: 750	Manuf: SAVARIA		Speed: 25	
Landings: 2	Installed: 03/22/2005	5	Rope Size:	
Volts: 110	Complied: 04/01/200	05	Entrances: 2	
OWNER		OCCUPANT		
BLADEN COUNTY SCHOOLS		EAST BLADEN HS PI	B#1	
PO BOX 2519		5600 NC HWY 87 EAST		
ELIZABETHTOWN, NC, 28337		ELIZABETHTOWN, NC, 28337		
	INSPECT	TION INFORMATION		
Inspection Date 11/13/2009	Type Inspection Routine	Certificate Status Re-issued	Inspector 48 - Martin	County BLADEN
		VIOLATIONS		
8.6.1.6.3[e] Properly maintain	all Control and operating circuits and dev		D. DOWN, DIDECTION	
Items must be corrected by: 12.	/03/2009			
Notify the Elevator Bureau in writing complainace with current codes.	ng on Corrected Violations Form when the	he following corrections have b	been made in order to bring yo	ur equipment into
Violations pointed out to: WILLIE		Inspector		
	To make changes to the invoice mailing address please call: 919-733-0372			
THIS IS NOT AN INVOICE	An invoice will be mailed to:	BLADEN COUNTY SCHOO PO BOX 2519 ELIZABETHTOWN, NC, 283		