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
9323-16-1225
State Number
6120

EQUIPMENT INSPECTED

State Number: **6120**
Capacity: 4000
Landings: 4
Volts: 208

Type of Unit: Passenger
Manuf: OTIS
Installed: 07/28/1968
Complied: 01/07/1969

Floor to Floor: 1 to 4
Speed: 200
Rope Size: 5/8
Entrances: 1

OWNER
BEAUFORT COUNTY HOSPITAL
628 E 12TH ST
WASHINGTON, NC, 27889

OCCUPANT
BEAUFORT COUNTY HOSPITAL
628 E 12TH ST
WASHINGTON, NC, 27889

INSPECTION INFORMATION

Inspection Date	Type Inspection	Certificate Status	Inspector	County
11/19/2009	Routine	Re-issued	16 - Moore	BEAUFORT

7

VIOLATIONS

8.6.4.15	Take steps to place the car emergency telephone in proper working order.
8.11.2.2.2	Perform an annual no load safety test and provide proper tags.

Items must be corrected by: 12/19/2009

Notify the Elevator Bureau in writing on Corrected Violations Form when the following corrections have been made in order to bring your equipment into complainace with current codes.

Violations pointed out to: Maintenance

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:
BEAUFORT COUNTY HOSPITAL
628 E 12TH ST
WASHINGTON, NC, 27889