

## 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 9336-48-0748
State Number 5122

|  | EC  | QUIPMENT INSPECTED  |                                |                    |  |
|--|---|---|--------------------------------|--------------------|--|
| State Number: 5122   | Type of Unit: Pass  | enger   | Floor to Floor: 1 to 3         |                    |  |
| Capacity: 4000   | Manuf: WESTBRO  | OOK   | Speed: 100                     |                    |  |
| Landings: 3  | Installed: 03/05/19   | 065   | Rope Size:                     |                    |  |
| Volts: 240   | Complied: 09/16/1   | 994   | Entrances: 1                   |                    |  |
| OWNER  |   | OCCUPANT  |                                |                    |  |
| BLADEN CO COURTHOUSE   |   | BLADEN CO COURT   | BLADEN CO COURTHOUSE           |                    |  |
| P O BOX 1626   |   | 200 E. BROAD ST.  | 200 E. BROAD ST.               |                    |  |
| ELIZABETHTOWN, NC, 28322   |   | ELIZABETHTOWN, N  | ELIZABETHTOWN, NC, 28327       |                    |  |
|  | INSI  | PECTION INFORMATION   |                                |                    |  |
| Inspection Date<br>12/02/2009                                    | Type Inspection<br>Routine  | Certificate Status<br>Re-issued                               | Inspector<br>48 - Martin       | County<br>BLADEN   |  |
|  |   | VIOLATIONS  |                                |                    |  |
| n/a No violations  | Iound   |   |                                |                    |  |
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| Notify the Elevator Bureau in writing                            | on Corrected Violations Form w  | hen the following corrections have b                          | peen made in order to bring yo | our equipment into |  |
| omplainace with current codes.  Violations pointed out to: JERRY |   |   | Inspector                      |                    |  |
| -  |   |   |                                |                    |  |
| To<br>THIS IS NOT AN   | make changes to the invoice mailing address please call: 919-733-0372 |   |                                |                    |  |
|  | invoice will be mailed to:  | BLADEN CO COURTHOUS<br>P O BOX 1626<br>ELIZABETHTOWN, NC, 283 |                                |                    |  |