

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

Invoice Number 567060

		EQUIPMENT INSI	PECTED		
State Number: 23971 Type of Unit: Passenger Capacity: 2000 Installed: 05/17/2006 Volts: 230 Floor to Floor: 1 to 3 Owner: CROW CREEK CONDO, 9300 OCEAN HWY 17W, C Occupant: CROW CREEK CONDO #9, 235 WOODLANDS W		Complie Entrance Y 17W, CALABASH,	d: 05/17/2006 ss: 1 NC, 28467	Manuf: THYSSEN KRUPP Speed: 55 Rope Size: 0	
		INSPECTION INFO	RMATION		
Inspection Date 08/07/2008	Type Inspection Routine	Certificate Status Re-issued	Inspector 48 - Martin	County Name BRUNSWICK	County Code 10
		VIOLATIONS FO			
Notify the Elevator Bu	reau in writing on Corrected equipt	Violations Form when ment into compliance w		tions have been made in	order to bring you
n/a No vi	olations found				
Violations pointed out to: JENNIFER				Inspector	
		INVOICE			
If not paid withi	l be issued. ce, your certificate beco	mes invalid.	Invoice	e Number	
Return this stub with payment to: NC Department of Labor, Budget a 1101 Mail Service Center, Raleigh, NC 27699-1101			asing Division,	56′ State Nbr:	7060 23971
Owner: CROW CREEK CONDO, 9300 OCEAN HWY 17W, CALABAS Occupant: CROW CREEK CONDO #9, 235 WOODLANDS WAY, CAL				Date: Fee:	08/07/2008 \$175