

## 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 567390

\$175

Fee:

		EQUIPMENT INSP	PECTED			
State Number: 22802 Type of Unit: Passe		enger Landings: 4		Manuf: THYS	Manuf: THYSSEN KRUPP	
Capacity: 3000	Installed: 05/10/2005	05 Complied: 02/15/2007		Speed: 125		
Volts: 208	Floor to Floor: 1 to 4			Rope Size:	Rope Size:	
Owner: CAM, P.O. BOX	8126, OCEAN ISLE BEACH,	NC, 28469				
Occupant: ISLANDER R	ESORT - BLDG. #62, 124 VI	A OLD SOUND BLV	D, OCEAN ISLE B	EACH, NC, 28469		
		INSPECTION INFOR	RMATION			
Inspection Date 02/25/2009	Type Inspection Routine	Certificate Status Re-issued	Inspector 48 - Martin	County Name BRUNSWICK		
Violation Abatement I	Date: 03/17/2009	VIOLATIONS FOUN	ID			
otify the Elevator Bureau quipment into compliance		tions Form when the f	_			
iolations pointed out to:	UNAVAILABLE			Inspector		
		INVOICE				
If not paid withi	e issued. your certificate beco	mes invalid				
Return this stub with payr 1101 Mail Service Center	-		State N			
wner: CAM, P.O. BOX 8126, OCEAN ISLE BEACH, NC, 28469				Date:	02/25/2009	

Occupant: ISLANDER RESORT - BLDG. #62, 124 VIA OLD SOUND BLVD, OCEAN ISLE

BEACH, NC, 28469