



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](http://www.nclabor.com/elevator.htm)

Invoice Number  
**567396**

### EQUIPMENT INSPECTED

State Number: 21905      Type of Unit: Passenger      Landings: 4      Manuf: THYSSEN KRUPP  
Capacity: 3000      Installed: 11/12/2003      Complied: 11/12/2003      Speed: 125  
Volts: 208      Floor to Floor: G to 3      Entrances: 1      Rope Size: 0  
Owner: CAM, P.O. BOX 8126, OCEAN ISLE BEACH, NC, 28469  
Occupant: ISLANDER RESORT - BLDG. #29, 4 JAN STREET, OCEAN ISLE BEACH, NC, 28469

### INSPECTION INFORMATION

Inspection Date	Type Inspection	Certificate Status	Inspector	County Name	County Code
03/03/2009	Routine	Re-issued	48 - Martin	BRUNSWICK	10

Violation Abatement Date: 03/23/2009

### VIOLATIONS FOUND

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

1.5.1      CAB LIGHTS

Violations pointed out to: UNAVAILABLE

Inspector \_\_\_\_\_

### INVOICE

No other invoice will be issued.

If not paid within 30 days from date of invoice, your certificate becomes invalid.

Return this stub with payment to: NC Department of Labor, Budget and Purchasing Division,  
1101 Mail Service Center, Raleigh, NC 27699-1101

Owner: CAM, P.O. BOX 8126, OCEAN ISLE BEACH, NC, 28469  
Occupant: ISLANDER RESORT - BLDG. #29, 4 JAN STREET, OCEAN ISLE BEACH, NC,  
28469

Invoice Number  
**567396**

State Nbr: 21905  
Date: 03/03/2009  
Fee: \$175