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
567399

EQUIPMENT INSPECTED

State Number: 19672	Type of Unit: Passenger	Landings: 4	Manuf: THYSSEN KRUPP
Capacity: 3000	Installed: 01/31/2001	Complied: 01/31/2001	Speed: 125
Volts: 208	Floor to Floor: G to 3	Entrances: 1	Rope Size:

Owner: CAM, P.O. BOX 8126, OCEAN ISLE BEACH, NC, 28469
Occupant: ISLANDER RESORT, 2 BECKY ST., 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.

8.6.4.15 Emergency operation of signaling devices,lighting, communication, and ventilation, shall be maintained. EMER. PHONE INOPERATIVE.

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, 2 BECKY ST., OCEAN ISLE BEACH, NC, 28469

Invoice Number
567399
State Nbr: 19672
Date: 03/03/2009
Fee: $175