

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 567401

\$175

Fee:

		EQUIPMENT INSP	ECTED			
State Number: 21071 Capacity: 3000	apacity: 3000 Installed: 06/18/2002		Complied: 06/18/2002		_	
Volts: 208	Floor to Floor: 1 to 4 8126, OCEAN ISLE BEACI		s: 1	Rope Size: .		
	ESORT - BLDG. #22, 4 BEC		E BEACH, NC, 284	69		
		INSPECTION INFOR				
Inspection Date 03/03/2009	Type Inspection Routine	Certificate Status Re-issued	Inspector 48 - Martin		County Cod 10	
	Date: 03/23/2009	VIOLATIONS FOUN				
quipment into compliance	in writing on Corrected Viol with current codes.					
n/a No vic	plations found					
olations pointed out to: UNAVAILABLE			Inspector			
		INVOICE				
If not paid within	be issued. e, your certificate become	nes invalid.	Invoice Number			
Return this stub with payment to: NC Department of Labor, Budget and Pu 101 Mail Service Center, Raleigh, NC 27699-1101			asing Division,	56° State Nbr:	7401 21071 03/03/2009	

Owner: CAM, P.O. BOX 8126, OCEAN ISLE BEACH, NC, 28469

Occupant: ISLANDER RESORT - BLDG. #22, 4 BECKY ST., OCEAN ISLE BEACH, NC, 28469