

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 593688

		EQUIPMENT INSPI	ECTED		
State Number: 11158	Type of Unit: Passenge			Manuf: THYSSEN	N KRUPP
Capacity: 2500	Installed: 09/10/1985	-	03/24/2006	Speed: 350	
Volts: 208	Floor to Floor: L to 10	Entrances		Rope Size: 5/8	
	OMEOWNERS, 303 SUGAR PRESORT, 303 SUGAR TOP I				
Elevator Name: #3	INSPEC	TION INFORMATION			
Inspection Date 10/06/2008	Type Inspection Routine	Certificate Status Re-issued	Inspector 4 - Henegar	County Name	County Code
Violation Abatement	Date: 11/05/2008	VIOLATIONS FOUNI)		
Notify the Elevator Burea equipment into compliance	nu in writing on Corrected Viola ce with current codes.	ations Form when the fo	llowing corrections	have been made in orde	er to bring your
8.11.2.1.2 Ta	ke steps to install annual no loa	d test tag.			
8.11.2.1.5 Ta	Take steps to remove debri from pit.				
8.11.2.1.2 Ta	Take steps to perform annual fire extinguisher inspection.				
√iolations pointed out to:	Dennis Lacey # 828-898-5226	5		Inspector	

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: SUGAR TOP HOMEOWNERS, 303 SUGAR TOP DRIVE, BANNER ELK, NC, 28604 Occupant: SUGAR TOP RESORT, 303 SUGAR TOP DRIVE, BANNER ELK, NC, 28604

Invoice Number 593688

State Nbr: 11158 Date: 10/06/2008 Fee: \$200