

Violations pointed out to: UNAVAILABLE

THIS IS NOT AN

INVOICE

## 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 919-707-7927 Report Number 10055-48-2038 State Number 24567

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		EQUIPMENT INSPECTED		
State Number: <b>24567</b> Type of Unit: I		Passenger	Floor to Floor: 1 to 3	
Capacity: 2000	Manuf: THYSS	Speed: 55		
Landings: 3	Installed: 03/07/2007		Rope Size: 0	
Volts: 230	Complied:		Entrances: 1	
OWNER		OCCUPANT		
CROW CREEK BLDG #15		CROW CREEK - BLDG #15		
395 SOUTH CROW CREEK DR		395 SOUTH CROW CREEK DR		
CALABASH, NC, 28467		CALABASH, NC, 28467		
		INSPECTION INFORMATION		
Inspection Date 02/24/2010	Type Inspection Routine	Certificate Status Re-issued	Inspector 48 - Martin	County BRUNSWICK
		VIOLATIONS		
2.7.5.1	Put the machine room lights in work			
2.7.3.4.1(b)	Provide a self closing, self locking machine room door.			
3.6.4.7.1	Clean the elevator pit.			
2.14.7.1.4	Put the car top light in working order.			
70	11 02/16/2010			
Items must be correcte				
lotify the Elevator Bureau omplainace with current c	in writing on Corrected Violations Formodes.	m when the following corrections	have been made in order to	bring your equipment i

CROW CREEK BLDG #15

CALABASH, NC, 28467

395 SOUTH CROW CREEK DR

To make changes to the invoice mailing address please call: 919-733-0372

An invoice will be mailed to:

Inspector \_\_\_\_