NCDOL NCDOL N. Department of labor

THIS IS NOT AN

INVOICE

An invoice will be mailed to:

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 10131-48-4024 State Number 23495

		EQUIPMENT INSPECTED			
State Number: 23495 Type of Unit:		Passenger	Floor to Floor: 1 to 3		
Capacity: 2100 Manuf: OTIS		\mathbf{S}	Speed: 100		
Landings: 3 Installed: 02/22/2006 Volts: 240 Complied: 02/22/2006		22/2006	Rope Size: 0 Entrances: 1		
		2/22/2006			
OWNER		OCCU	OCCUPANT		
COMMUNITY ASSOCIA	TION MGMT.	VILL	VILLAS ON OSPREY RIDGE 170 CLUB HOUSE RD.		
P.O. BOX 8126		170 C			
OCEAN ISLE BEACH, N	C, 28469	SUNS	SUNSET BEACH, NC, 28468		
	п	NSPECTION INFORMATION			
Inspection Date 05/11/2010	Type Inspection Routine	Certificate Status Re-issued	Inspector 48 - Martin	County BRUNSWICK 1	
		VIOLATIONS			
2.27.1.1.2 Put	the in car emergency telephone in prop	er working order.			
Items must be corrected	by: 05/21/2010				
Notify the Elevator Bureau i complainace with current co	n writing on Corrected Violations Forndes.	n when the following corrections	have been made in order to	bring your equipment into	
Violations pointed out to: U			Inspector		
	To make changes to the invoice r	mailing address please call: 919-7			

P.O. BOX 8126

COMMUNITY ASSOCIATION MGMT.

OCEAN ISLE BEACH, NC, 28469