

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 10188-48-5743 State Number 21812

| | | EQUIPMENT INSPECTED | | |
|---|--|--|--------------------------|---------------------------|
| State Number: 21812 | Type of Unit: Passenger Manuf: RENAME Installed: 05/29/2003 Complied: 06/11/2003 | | Floor to Floo | r: . to . |
| Capacity: 2100 | | | Speed: 0 | |
| Landings: 0 | | | Rope Size: . | |
| Volts: 0 | | | Entrances: 0 | |
| OWNER | OCCUPANT | | | |
| CROW CREEK | CROW CREEK CONDO | | | |
| 9300 OCEAN WAY | 260 S. CROW CREEK DR. | | | |
| CALABASH, NC, 28467 | | CALABASH, NC, 28 | 8467 | |
| | n | NSPECTION INFORMATION | | |
| Inspection Date 07/07/2010 | Type Inspection Routine | Certificate Status Re-issued | Inspector 48 - Martin | County BRUNSWICK |
| | | VIOLATIONS | | |
| | | | | |
| complainace with current code Violations pointed out to: UN | writing on Corrected Violations Forns. AVAILABLE | - | Inspector | bring your equipment into |
| THE ICASOT IN | To make changes to the invoice mailing address please call: 919-733-0372 | | | |
| THIS IS NOT AN INVOICE | An invoice will be mailed to: | CROW CREEK 9300 OCEAN WAY CALABASH, NC, 2846 | 7 | |