

## 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 11054-48-5175 State Number 24650

	E	QUIPMENT INSPECTED		
State Number: 24650 Type of Unit: Pas Capacity: 2000 Manuf: THYSSE Landings: 3 Installed: 02/01/2 Volts: 230 Complied:		N KRUPP	Floor to Floor: 1 to 3 Speed: 55 Rope Size: 0	
		Entrances: 1		1
OWNER		OCCUP.	ANT	
CROW CREEK #12			CREEK - BLDG. #12	
395 SOUTH CROW CREEK I	DRIVE		OW CREEK DRIVE	
CALABASH, NC, 28467		CALABASH, NC, 28467		
	INS	SPECTION INFORMATION		
Inspection Date 02/23/2011	Type Inspection Routine	Certificate Status Re-issued	Inspector 48 - Martin	County BRUNSWICK
		VIOLATIONS		
Items must be corrected by:  Notify the Elevator Bureau in wr complainace with current codes.  Violations pointed out to: Manag	iting on Corrected Violations Form w		Inspector	
		iling address places call 010.7		
THIS IS NOT AN	To make changes to the invoice mailing address please call: 919-733-0372			
INVOICE	An invoice will be mailed to:	CROW CREEK #12 395 SOUTH CROW CR CALABASH, NC, 2846		