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
11055-48-4597
State Number
22317

EQUIPMENT INSPECTED

State Number: **22317**
Capacity: 2100
Landings: 3
Volts: 240

Type of Unit: Passenger
Manuf: THYSSEN KRUPP
Installed: 10/20/2004
Complied: 11/04/2004

Floor to Floor: 1 to 3
Speed: 2100
Rope Size:
Entrances: 1

OWNER
CROW CREEK
9300 OCEAN HWY 17, WEST
CALABASH, NC, 28467

OCCUPANT
CROW CREEK CONDOS #4
280 WOODLANDS WAY, SW
CALABASH, NC, 28467

INSPECTION INFORMATION

Inspection Date	Type Inspection	Certificate Status	Inspector	County
02/24/2011	Routine	Re-issued	48 - Martin	BRUNSWICK

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VIOLATIONS

8.6.8.9 Signs. Caution signs shall be provided. Damaged or missing signs shall be replaced. Missing on 2nd FL

8.11.2.2.2 Perform the annual no load safety test

Items must be corrected by: 03/26/2011

Notify the Elevator Bureau in writing on Corrected Violations Form when the following corrections have been made in order to bring your equipment into complainace with current codes.

Violations pointed out to: Management

Inspector _____

THIS IS NOT AN INVOICE

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

An invoice will be mailed to:
CROW CREEK
9300 OCEAN HWY 17, WEST
CALABASH, NC, 28467