

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 11076-48-4799 State Number 26232

	1	EQUIPMENT INSPECTED			
State Number: 26232	Type of Unit:	Type of Unit: Passenger		1 to 2	
Capacity: 2500 Manuf: TKE		C	Speed: 135		
Landings: 2	Installed: 01/28/2009 Complied: 01/28/2009		Rope Size:		
Volts: 200			Entrances: 1		
OWNER	OCCUPANT				
OAK ISLAND TOWN HALL	OAK ISLAND TOWN HALL SOUTH HARBOR VILLAGE FIRE DEPARTMENT				
4601 E. OAK ISLAND DR.					
OAK ISLAND, NC, 28465 OAK ISLAND, NC, 28465					
	IN	SPECTION INFORMATION			
Inspection Date 03/17/2011	Type Inspection Routine	Certificate Status Re-issued	Inspector 48 - Martin	County BRUNSWICK 10	
		VIOLATIONS			
Elevator Name: #1 Notify the Elevator Bureau in wr complainace with current codes. Violations pointed out to: MAN.	iting on Corrected Violations Form	when the following corrections		bring your equipment into	
	To make changes to the invoice mailing address please call: 919-733-0372				
THIS IS NOT AN INVOICE	An invoice will be mailed to:	OAK ISLAND TOWN I 4601 E. OAK ISLAND I OAK ISLAND, NC, 284	DR.		