



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](http://www.nclabor.com/elevator.htm)  
919-707-7927

Report Number  
**11199-16-2222**  
State Number  
**24436**

EQUIPMENT INSPECTED

State Number: **24436**

Capacity: 2500

Landings: 4

Volts: 230

Type of Unit: Passenger

Manuf: TKE

Installed: 01/09/2007

Complied: 01/09/2007

Floor to Floor: P to 3

Speed: 125

Rope Size: 0

Entrances: 2

OWNER

DAY BEACON HOA

PO BOX 1303

MANTEO, NC, 27954

OCCUPANT

DAY BEACON

326 E WATER STREET

BELLHAVEN, NC, 27810

INSPECTION INFORMATION

Inspection Date  
07/18/2011

Type Inspection  
Routine

Certificate Status  
Re-issued

Inspector  
16 - Moore

County  
BEAUFORT

7

VIOLATIONS

2.12.2.4.1 Install the missing interlock covers where needed. P floor door interlock cover

8.6.1.6.5 Provide the required fire extinguisher in the machine room.

Items must be corrected by: 08/17/2011

Elevator Name: A

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

Violations pointed out to: No one there

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:

DAY BEACON HOA  
PO BOX 1303  
MANTEO, NC, 27954