

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 15230-48-282 State Number 20331

EQUIPMENT INSPECTED						
State Number: 20331		Type of Unit	Type of Unit: Passenger		Floor to Floor: 1 to 3	
Capacity: 2100			Manuf: SCHINDLER		Speed: 100	
Landings: 3 Volts: 208 OWNER		Installed: 10	Installed: 10/18/2001 Complied: 10/30/2001 OCCUPANT		Rope Size: Entrances: 1	
		Complied: 1				
	ESIDENTIAL		OCEAN GREENS CO	NDO #5		
ATTN: JACKIE BULL			71-74 FOXFIRE TRACE			
CHAROL	LETTE, NC, 28465		CASWELL BEACH, N	IC, 28465		
			INSPECTION INFORMATION			
Inspection Date 08/18/2015		Type Inspection Routine	Certificate Status Re-issued	Inspector 48 - Martin	County BRUNSWICK	10
			VIOLATIONS			
8.6.4.13.1[i] Properly maintain	clutches, engaging vanes, retiring	cams, and engaging rollers. [CAI	R DR. CLUTCH RUBBING	G FACIA WHEN LEAVING	3 1ST.
8.6.4.13.1[f] Properly maintain 2ND. FL. DOOR		nrusts, and door safety retainers, w	here required. [PROVIDE	MISSING PICKUP ROLLE	R ON
8.6.4.7.1	Clean the elevator	pit.				
2.27.3.3	Put the Phase II fire service feature in proper working order. [CALL CANCEL BUTTON INOPERATIVE]					
8.6.4.8.1 Clean the elevator machine room.						
Items must be corrected by: 09/17/2015				Elevator Name: #5		
	Elevator Bureau in was with current codes.		m when the following corrections	have been made in order to	bring your equipment into	
Violations p	pointed out to: UNA					
			o make changes to the invoice mailing address please call: 919-733-0372			
THIS IS NOT AN INVOICE		FIRST RESIDENTIAL An invoice will be mailed to: ATTN: JACKIE BULL CHAROLETTE, NC, 28465				