

complainace with current codes.

THIS IS NOT AN

INVOICE

Violations pointed out to: UNAVAILABLE

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 15230-48-2938 State Number 15363

| EQUIPMENT INSPECTED | | | | | | |
|--|----------------------------------|---|----------------------------------|----------------------------|---------------------------|--|
| State Number: 15363 | | Type of Unit: | Type of Unit: Passenger | | G to 2 | |
| Capacity: 2100 | | Manuf: OTIS | | Speed: 125 | | |
| Landings: 3 | | Installed: 03/25/1994 | | Rope Size: | | |
| Volts: 208 | | Complied: 03/25/1994 | | Entrances: 1 | | |
| OWNER | | | OCCUPANT | | | |
| CASWELL PARTNERSHIP | | | OCEAN GREEN | IS BLDG #4 | | |
| OCEAN GREENS LANE | | 59-62 FOX FIRE LN. | | | | |
| CASWELL BEACH, NC, 28465 | | CASWELL BEACH, NC, 28465 | | | | |
| | |] | INSPECTION INFORMATION | | | |
| Inspection Date 08/18/2015 | | Type Inspection Routine | Certificate Status Re-issued | Inspector 48 - Martin | | |
| | | | VIOLATIONS | | | |
| 8.6.4.7.1 | Clean the elevator pit. | | | | | |
| 2.7.3.4.1(b) | Provide a self c | Provide a self closing, self locking machine room door. | | | | |
| 2.27.3.1 | Put the Phase I | Put the Phase I fire service feature in proper working order. [KEY SWITCH JAMMED] | | | | |
| 8.6.4.8.1 | Clean the elevator machine room. | | | | | |
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| Items must be corrected by: 09/17/2015 | | | | Elevator Name: #4 | | |
| | | | m when the following corrections | have been made in order to | bring your equipment into | |

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CASWELL PARTNERSHIP

OCEAN GREENS LANE CASWELL BEACH, NC, 28465

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

An invoice will be mailed to:

Inspector ____