

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 15349-48-1056 State Number 21953

| | | EQUIPMENT INSPECTED | | |
|--|---|--|---|---------------------------|
| State Number: 21953 Capacity: 2500 Landings: 2 | Type of Unit: Passenger Manuf: OTIS Installed: 06/17/2004 Complied: 06/24/2004 OCCUPANT | | Floor to Floor: 1 to 2 Speed: 100 Rope Size: . Entrances: 1 | |
| Volts: 208 | | | | |
| OWNER | | | | |
| NANCY LEWIS | | SHOALS CLUB PHASE I | | |
| 100 STATION HOUSEWAY BALDHEAD ISLAND, NC, 28461 BALDHEAD ISLAND, NC, 28461 | | | | |
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| | | NSPECTION INFORMATION | | |
| Inspection Date 12/15/2015 | Type Inspection Routine | Certificate Status Re-issued | Inspector 48 - Martin | County BRUNSWICK 10 |
| | | VIOLATIONS | | |
| 8.6.4.7.1 Clean the elevator pit. | | | | |
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| Items must be corrected by: 01/14/2016 | | | Elevator Name: # 1 | |
| Notify the Elevator Bureau in write complainace with current codes. | ing on Corrected Violations Form | m when the following corrections | have been made in order to | bring your equipment into |
| Violations pointed out to: W. MACK | | | Inspector | |
| | To make changes to the invoice mailing address please call: 919-733-0372 | | | |
| THIS IS NOT AN INVOICE | An invoice will be mailed to: | NANCY LEWIS 100 STATION HOUSE BALDHEAD ISLAND, | | |