



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  
**16088-48-1889**  
State Number  
**23931**

#### EQUIPMENT INSPECTED

|                             |                             |                        |
|-----------------------------|-----------------------------|------------------------|
| State Number: <b>23931</b>  | Type of Unit: Passenger     | Floor to Floor: 1 to 4 |
| Capacity: 3000              | Manuf: THYSSEN KRUPP        | Speed: 125             |
| Landings: 4                 | Installed: 05/08/2006       | Rope Size: 0           |
| Volts: 208                  | Complied: 02/08/2007        | Entrances: 1           |
| OWNER                       | OCCUPANT                    |                        |
| CAM                         | ISLANDER RESORT - BLDG. #43 |                        |
| P.O. BOX 8126               | 158 VIA OLD SOUND BLVD      |                        |
| OCEAN ISLE BEACH, NC, 28469 | OCEAN ISLE BEACH, NC, 28469 |                        |

#### INSPECTION INFORMATION

|                               |                            |                                 |                          |                     |
|-------------------------------|----------------------------|---------------------------------|--------------------------|---------------------|
| Inspection Date<br>03/28/2016 | Type Inspection<br>Routine | Certificate Status<br>Re-issued | Inspector<br>48 - Martin | County<br>BRUNSWICK |
|-------------------------------|----------------------------|---------------------------------|--------------------------|---------------------|

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#### VIOLATIONS

2.27.3.1 Put the Phase I fire service feature in proper working order. [NO AUDIBLE]  
8.6.8.9 Signs. Caution signs shall be provided. Damaged or missing signs shall be replaced. [1ST & 3RD FL]

Items must be corrected by: 05/28/2016

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: UNAVAILABLE

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:

CAM  
P.O. BOX 8126  
OCEAN ISLE BEACH, NC, 28469