NEDOL N. Dopument of Labor

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 16089-48-3573 State Number 20633

EQUIPMENT INSPECTED						
State Number: 20633 Type of Ur		Type of Unit: Pa	: Passenger Floor to		oor: 1 to 4	
Capacity: 3000 Manuf: TH		Manuf: THYSSI	YSSEN KRUPP Speed:		125	
Landings: 4	1	Installed: 02/06/	/06/2002 Rope Size			
Volts: 208		Complied: 02/08	Complied: 02/08/2002		Entrances: 1	
OWNER			OCCUPANT			
CAM			ISLANDER RESORT			
P.O. BOX 8126			3 BECKY ST.			
OCEAN ISLE BEACH, NC, 28469		OCEAN ISLE BEACH, NC, 28469				
		I	NSPECTION INFORMATION			
Inspection Date 03/29/2016		Type Inspection Routine	Certificate Status Re-issued	Inspector 48 - Martin	County BRUNSWICK	
			VIOLATIONS			
2.14.7.1	Put the car lights in	proper working order. [DIM]				
5.1.21.1						
2.27.3.1	Put the Phase I fire service feature in proper working order. [INOPERATIVE]					

Items must be corrected by: 05/29/2016

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

Violations pointed out to: UNAVAILABLE 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: P.O. BOX 8126

OCEAN ISLE BEACH, NC, 28469