



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
16334-48-4985
State Number
24946

EQUIPMENT INSPECTED

| | | |
|--|--|------------------------|
| State Number: 24946 | Type of Unit: Passenger | Floor to Floor: 1 to 2 |
| Capacity: 2500 | Manuf: OTIS | Speed: 100 |
| Landings: 2 | Installed: 10/17/2007 | Rope Size: |
| Volts: 480 | Complied: 10/17/2007 | Entrances: 1 |
| OWNER | OCCUPANT | |
| COASTAL CAROLINA RADIATION ONCOLOGY CENT | COASTAL CAROLINA RADIATION ONCOLOGY CENT | |
| 1988 S. 16TH ST. | 545 OCEAN HWY WEST | |
| WILMINGTON, NC, 28401 | SUPPLY, NC, 28462 | |

INSPECTION INFORMATION

| | | | | |
|-------------------------------|----------------------------|---------------------------------|--------------------------|---------------------|
| Inspection Date 11/29/2016 | Type Inspection Routine | Certificate Status Re-issued | Inspector 48 - Martin | County BRUNSWICK |
|-------------------------------|----------------------------|---------------------------------|--------------------------|---------------------|

10

VIOLATIONS

Elevator Name: # 1

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: LISA

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:

COASTAL CAROLINA RADIATION ONCOLOGY CENT
1988 S. 16TH ST.
WILMINGTON, NC, 28401