NCDOL NC. Department 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 16336-48-1681 State Number 21706

			EQUIPMENT INSPECTED			
State Number: 2	1706	Type of Unit:		Floor to Floor: 1 to 2		
Capacity: 2500			Manuf: OTIS		Speed: 125	
Landings: 2			Installed: 08/28/2003		Rope Size: 0 Entrances: 1	
Volts: 208		Complied: 08	Complied: 08/28/2003			
OWNER			OCCUPANT			
SOUTHERN SI		HOA	SOUTHERN SHORE VILLAGE			
122 SE 58TH. S			122 SE 58TH ST			
OAK ISLAND, NC, 28645			OAK ISLAND, NC, 28645			
		I	NSPECTION INFORMATION			
Inspection Date 12/01/2016		Type Inspection Routine	Certificate Status Re-issued	Inspector 48 - Martin	County BRUNSWICK	10
			VIOLATIONS			
2.27.1.1.2	Put the in	in car emergency telephone in proper working order.				
8.6.4.8.1	Clean the	an the elevator machine room. [2ND. YR.]				
2.2.2.4	Install the cover on the sump pump. [2ND. YR.]					
2.2.2.4	Put the sump pump in proper working order.					
8.6.4.7.4	Remove	the water from the pit floor.				

Elevator Name: #1

Inspector _

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

THIS IS NOT AN INVOICE

complainace with current codes.

Items must be corrected by: 02/01/2017

Violations pointed out to: UNAVAILABLE

SOUTHERN SHORE VILLAS HOA

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

An invoice will be mailed to: 122 SE 58TH. ST

OAK ISLAND, NC, 28645