

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 9195-48-506
State Number 22317

	E	QUIPMENT INSPECTED		
State Number: 22317 Type of Unit: Pas		enger	Floor to Floor: 1 to 3	
Capacity: 2100	Manuf: THYSSEN	N KRUPP	Speed: 2100)
Landings: 3	Installed: 10/20/2004 Complied: 11/04/2004		Rope Size:	
Volts: 240			Entrances: 1	
OWNER	OCCUPANT			
CROW CREEK	CROW CREEK CONDOS #4			
9300 OCEAN HWY 17, WEST				
CALABASH, NC, 28467				
	INS	PECTION INFORMATION		
Inspection Date 07/14/2009	Type Inspection Routine	Certificate Status Re-issued	Inspector 48 - Martin	County BRUNSWICK
		VIOLATIONS		
complainace with current codes. Violations pointed out to: MARK	ing on Corrected Violations Form w		Inspector	bring your equipment into
	To make changes to the invoice mailing address please call: 919-733-0372			
THIS IS NOT AN	An invoice will be mailed to:	CROW CREEK 9300 OCEAN HWY 17, CALABASH, NC, 2846	WEST	