

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 9202-48-4616
State Number 26864

	E	QUIPMENT INSPECTED			
State Number: 26864 Type of Unit: P		assenger	Floor to Floor:	1 to 3	
Capacity: 2000	Manuf: TKE		Speed: 55		
Landings: 3	Installed: 07/21/	2009	Rope Size: Entrances: 1		
Volts: 230	Complied: 07/21	1/2009			
OWNER			OCCUPANT		
SAMANTHA HUGHES/GLENN GOLDSWORTH			INLET VIEW BAR & GI	RILL	
1039 HIGHTPOINT AVE SW			1800 VILLAGE POINT I		
CALABASH, NC, 28467			SHALLOTTE, NC, 28470		
	INS	PECTION INFORMATION	N		
Inspection Date 07/21/2009	Type Inspection New	Certificate Status Issued	Inspector 48 - Martin	County BRUNSWICK	
		VIOLATIONS			
Elevator Name: #1 Notify the Elevator Bureau in w complainace with current codes	riting on Corrected Violations Form w	hen the following correction	ns have been made in order to	bring your equipment into	
Violations pointed out to: BOB	[TKE]				
	To make changes to the invoice mailing address please call: 919-733-0372				
THIS IS NOT AN INVOICE	An invoice will be mailed to:	= =	ES/GLENN GOLDSWORTH AVE SW		