

## 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 11115-48-5799 State Number 26543

EQUIPMENT INSPECTED					
State Number: 26543 Type of Unit: Capacity: 2500 Manuf: SCH Landings: 4 Installed: 03/ Volts: 208 Complied:		NDLER	Floor to Floor: Speed: 125 Rope Size: Entrances: 1	1 to 4	
OWNER COASTAL HOSPITALITY LL 1511 N HOWE STREET SOUTHPORT, NC, 28461	-	OCCUPANT SOUTHPORT V 1511 N HOWE SOUTHPORT,	T RT WINGATE INN WE STREET		
	IN	SPECTION INFORMATION			
Inspection Date 04/25/2011	Type Inspection Routine	Certificate Status Re-issued	Inspector 48 - Martin	County BRUNSWICK 1	
		VIOLATIONS			
Items must be corrected by: 05/25/2011			Elevator Nam	Elevator Name: # 2	
Notify the Elevator Bureau in wri complainace with current codes.	ting on Corrected Violations Form	when the following corrections	have been made in order to	bring your equipment into	
Violations pointed out to: OLGA					
THIS IS NOT AN INVOICE	To make changes to the invoice me.  An invoice will be mailed to:	nailing address please call: 919-7.  COASTAL HOSPITALI  1511 N HOWE STREET  SOUTHPORT, NC, 2846	TY LLC		