

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 11146-36-556 State Number 21192

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		EQUIPMENT INSPECTED			
tate Number: 21192 Type of Unit: Passer		Passenger	Floor to Floor: 1 to 3		
Capacity: 2500	Manuf: OTIS		Speed: 150		
Landings: 3	Installed: 09/10/2002		Rope Size: 0		
Volts: 208	Complied: 09/10/2002		Entrances: 1		
OWNER	OCCUPANT				
HOLIDAY INN EXPRESS		HOLIDAY INN EXPRESS			
149 SPRING FOREST DRIVE		149 SPRING FOREST DRIVE			
MEBANE, NC, 27302		MEBANE, NC, 27302			
		NSPECTION INFORMATION			
Inspection Date 05/26/2011	Type Inspection Routine	Certificate Status Re-issued	Inspector 36 - Kirkman	County ALAMANCE	
		VIOLATIONS			
2.27.7.1 Provide Phase I fi	re service instructions at the recal	l landing. (INSIDE OF CAR)			
Ta 4	(/25/2011				
Items must be corrected by: 0					
Notify the Elevator Bureau in writ omplainace with current codes.	ing on Corrected Violations Form	when the following corrections h	have been made in order to bri	ng your equipment into	
Violations pointed out to: HAMZ			Inspector		
	To make changes to the invoice mailing address please call: 919-733-0372				
THIS IS NOT AN INVOICE	An invoice will be mailed to:	HOLIDAY INN EXPRES 149 SPRING FOREST D MEBANE, NC, 27302			