



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
13094-48-137
State Number
26649

EQUIPMENT INSPECTED

State Number: 26649	Type of Unit: Passenger	Floor to Floor: 1 to 3
Capacity: 3000	Manuf: OTIS	Speed: 125
Landings: 3	Installed: 04/22/2009	Rope Size:
Volts: 208	Complied:	Entrances: 1
OWNER	OCCUPANT	
COMFORT SUITES - LELAND	COMFORT SUITES - LELAND	
1020 GRANDIFLORA DRIVE	1020 GRANDIFLORA DRIVE	
LELAND, NC, 28451	LELAND, NC, 28451	

INSPECTION INFORMATION

Inspection Date 04/04/2013	Type Inspection Routine	Certificate Status Re-issued	Inspector 48 - Martin	County BRUNSWICK
-------------------------------	----------------------------	---------------------------------	--------------------------	---------------------

10

VIOLATIONS

n/a No violations found

Elevator Name: # 1

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

Violations pointed out to: John

Inspector _____

THIS IS NOT AN
INVOICE

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

An invoice will be mailed to:

COMFORT SUITES - LELAND
1020 GRANDIFLORA DRIVE
LELAND, NC, 28451