



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](http://www.nclabor.com/elevator.htm)  
919-707-7927

Report Number  
**14097-48-0467**  
State Number  
**26649**

EQUIPMENT INSPECTED

State Number: <b>26649</b>	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
LELAND HOLDINGS,LLC ADB HOLIDAYINN EXPRE		HOLIDAYINN EXPRESS
1020 GRANDIFLORA DRIVE		1020 GRANDIFLORA DRIVE
LELAND, NC, 28451		LELAND, NC, 28451

INSPECTION INFORMATION

Inspection Date 04/07/2014	Type Inspection Routine	Certificate Status Re-issued	Inspector 48 - Martin	County BRUNSWICK
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VIOLATIONS

8.6.4.8.2 Remove all materials from machine room (machinery space) not pertaining to the maintenance or operation of the elevator(s).  
2.26.12 Provide Braille where needed.. [ALL FLOORS]

Items must be corrected by: 05/07/2014

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: TINISHA GREEN

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:

LELAND HOLDINGS,LLC ADB HOLIDAYINN EXPRE  
1020 GRANDIFLORA DRIVE  
LELAND, NC, 28451