

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 16224-48-2616 State Number 29480

	1	EQUIPMENT INSPECTED			
State Number: 29480 Type of Unit:		Passenger	Floor to Floor: 1 to 4		
Capacity: 3500 Manuf: TKE		_	Speed: 125		
Landings: 4 Installed: 06/26/2014 Volts: 208 Complied:		5/2014	4 Rope Size: Entrances: 1		
OWNER		OCCUPANT			
	EAST COAST HOSPITALITY HOLIDAY INN EXPRESS SOUTHPORT				
719 W 15TH ST STE 11 HWY 211					
WASHINGTON, NC, 27889		SOUTHPORT, NC, 28461			
	IN	SPECTION INFORMATION			
Inspection Date 08/11/2016	Type Inspection Routine	Certificate Status Re-issued	Inspector 48 - Martin	County BRUNSWICK 1	
		VIOLATIONS			
Items must be corrected by: Notify the Elevator Bureau in wricomplainace with current codes. Violations pointed out to: ALEX	iting on Corrected Violations Form	when the following corrections have	Elevator Name: # 1 ollowing corrections have been made in order to bring your equipment into Inspector		
THE ICNOT AND	To make changes to the invoice mailing address please call: 919-733-0372				
THIS IS NOT AN INVOICE	An invoice will be mailed to:	EAST COAST HOSPITALI 719 W 15TH ST STE 11 WASHINGTON, NC, 27889			