

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

Invoice Number 575342

		EQUIPME	NT INSPECTED			
State Number: 23991 Type of Unit: Passenger Capacity: 2500 Installed: 09/05/2006 Volts: 208 Floor to Floor: 1 to 5 Owner: HAMPTON INN, 2935 SACONN DRIVE, BUT Occupant: HAMPTON INN, 2935 SACONN DRIVE, B		006 o 5 , BURLINGTON, VE, BURLINGTO	Complied: 09/05/2006 Entrances: 1 LINGTON, NC, 27215 URLINGTON, NC, 27215		Manuf: THYSSEN KRUPP Speed: 150 Rope Size:	
			N INFORMATION			
Inspection Date Type Inspection Routine		Re-issued	36 - Ki	irkman A		1
	Date: 09/14/2008					
Notify the Elevator Bureau equipment into compliance	with current codes.		nen the following co			o bring your
Violations pointed out to: office			Ins		pector	
		IN	VOICE			
_	-	voice, your certific	vill be issued. Dice, your certificate becomes invalid. Labor, Budget and Purchasing Division,		Invoice 575	Number 342
1101 Mail Service Center, Raleigh, NC 27699-1101 Owner: HAMPTON INN, 2935 SACONN DRIVE Occupant: HAMPTON INN, 2935 SACONN DRIVE		1 E, BURLINGTON,	BURLINGTON, NC, 27215		State Nbr: 23991 Date: 08/15/2008 Fee: \$175	