

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)

Invoice Number  
**575721**

EQUIPMENT INSPECTED

State Number: 17516      Type of Unit: Passenger      Landings: 3      Manuf: OTIS  
Capacity: 2500      Installed: 07/21/1998      Complied: 07/21/1998      Speed: 100  
Volts: 208      Floor to Floor: B to 2      Entrances: 1      Rope Size:  
Owner: B D DIAGNOSTICS, 780 PLANTATION DR, BURLINGTON, NC, 27215  
Occupant: B D DIAGNOSTICS, 780 PLANTATION DR, BURLINGTON, NC, 27215

INSPECTION INFORMATION

Inspection Date	Type Inspection	Certificate Status	Inspector	County Name	County Code
04/13/2009	Routine	Re-issued	36 - Kirkman	ALAMANCE	1

VIOLATIONS FOUND

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.

NONE FOUND

Violations pointed out to: office

Inspector \_\_\_\_\_

INVOICE

No other invoice will be issued.  
If not paid within 30 days from date of invoice, your certificate becomes invalid.

Return this stub with payment to: NC Department of Labor, Budget and Purchasing Division,  
1101 Mail Service Center, Raleigh, NC 27699-1101

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Invoice Number  
**575721**  
State Nbr: 17516  
Date: 04/13/2009  
Fee: \$175