

INVOICE

An invoice will be mailed to:

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 10095-36-4913 State Number 13791

1

| | | EQUIPMENT INSPECTED | | |
|--|--|----------------------------------|--|------------------------|
| State Number: 13791 Capacity: 2500 Landings: 4 | Type of Unit: Passenger Manuf: OTIS Installed: 05/16/1990 | | Floor to Floor: L to 3 Speed: 125 Rope Size: | |
| Volts: 208 | Complied: 05/20/1990 | | Entrances: 1 | |
| OWNER | OCCUPANT | | | |
| COMFORT INN I-85 KIRKPATRICK | COMFORT INN I-85 KIRKPATRICK | | | |
| BURLINGTON, NC, 27215 | BURLINGTON, NC, 27215 | | | |
| | BOKEHOTON, NC, 27213 | | | |
| | | INSPECTION INFORMATION | | |
| Inspection Date 04/05/2010 | Type Inspection Routine | Certificate Status Re-issued | Inspector 36 - Kirkman | County ALAMANCE |
| | | VIOLATIONS | | |
| | | | | |
| Notify the Elevator Bureau in writin complainace with current codes. Violations pointed out to: CYNDIE | | m when the following corrections | have been made in order to bri Inspector | ng your equipment into |
| | | | | |
| THIS IS NOT AN | To make changes to the invoice mailing address please call: 919-733-0372 HIS IS NOT AN COMFORT INN | | | |

I-85 KIRKPATRICK

BURLINGTON, NC, 27215