



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  
**12335-36-5667**  
State Number  
**17240**

EQUIPMENT INSPECTED

State Number: <b>17240</b>	Type of Unit: Passenger	Floor to Floor: 1 to 4
Capacity: 2500	Manuf: OTIS	Speed: 125
Landings: 4	Installed: 04/14/1998	Rope Size:
Volts: 208	Complied: 04/15/1998	Entrances: 1
OWNER	OCCUPANT	
FCM BURLINGTON LLC	COURTYARD BY MARRIOTT	
PO BOX 7246	3141 WILSON DRIVE	
ROCKY MOUNT, NC, 27804	BURLINGTON, NC, 27215	

INSPECTION INFORMATION

Inspection Date 11/30/2012	Type Inspection Routine	Certificate Status Re-issued	Inspector 36 - Kirkman	County ALAMANCE
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1

VIOLATIONS

8.6.4.7.1 Clean the elevator pit.

8.6.1.7.2 A metal tag with the applicable code requirement(s) and date(s) performed, and the name of the person or firm performing the test, shall be installed to be readily visible and securely attached to the controller

Items must be corrected by: 12/30/2012

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: gregg comito 336-585-1888

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:

FCM BURLINGTON LLC  
PO BOX 7246  
ROCKY MOUNT, NC, 27804