

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 13330-36-5889 State Number 17241

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| | Е | QUIPMENT INSPECTED | | | |
|--|--|--|--------------------------------|------------------------|--|
| State Number: 17241 | Type of Unit: Pa | assenger | Floor to Floor: 1 | to 4 | |
| Capacity: 2500 | Manuf: OTIS | | Speed: 125 | Speed: 125 | |
| Landings: 4 | Installed: 04/14 | 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 | | | |
| | INS | PECTION INFORMATION | | | |
| Inspection Date 11/26/2013 | Type Inspection Routine | Certificate Status Re-issued | Inspector 36 - Kirkman | County ALAMANCE | |
| | | VIOLATIONS | | | |
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| Notify the Elevator Bureau in wromplainace with current codes. | iting on Corrected Violations Form v | when the following corrections l | have been made in order to bri | ng your equipment into | |
| Violations pointed out to: gregg comito 336-585-1888 | | | Inspector | | |
| | To make changes to the invoice mailing address please call: 919-733-0372 | | | | |
| THIS IS NOT AN INVOICE | An invoice will be mailed to: | FCM BURLINGTON LI PO BOX 7246 ROCKY MOUNT, NC, 2 | | | |