



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
14050-36-0981
State Number
24073

EQUIPMENT INSPECTED

State Number: 24073	Type of Unit: Passenger	Floor to Floor: 1 to 2
Capacity: 2000	Manuf: OTIS	Speed: 100
Landings: 2	Installed: 07/05/2006	Rope Size: 0
Volts: 480	Complied: 06/05/2006	Entrances: 1
OWNER	OCCUPANT	
DR KHAN	ALLIANCE MEDICAL ASSOCIATES COMPLEX	
2904 CROUSE LANE	2904 CROUSE LANE	
BURLINGTON, NC, 27215	BURLINGTON, NC, 27215	

INSPECTION INFORMATION

Inspection Date 02/19/2014	Type Inspection Routine	Certificate Status Re-issued	Inspector 36 - Kirkman	County ALAMANCE
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1

VIOLATIONS

NONE 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.

Violations pointed out to: DR. KHAN 336-538-2494

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:

DR KHAN
2904 CROUSE LANE
BURLINGTON, NC, 27215