

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 15169-59-4781 State Number 20804

| EQUIPMENT INSPECTED | | | | | |
|--|---|------------------------------|--|--------------------|------|
| State Number: 20804 | apacity: 2500 Manuf: SCHINDLER | | Floor to Floor: 1 to 3 Speed: 150 Rope Size: | | |
| Capacity: 2500 | | | | | |
| Landings: 3 | | | | | |
| Volts: 208 Complied: 05/02/2002 OWNER | | Entrances: 1 | | | |
| | | | OCCUPANT | | |
| ARC HOSPATALITY PORTFOLIO II/NTC TRES LP | | | SPRINGHILL SUITES AS | HEVILLE | |
| PO BOX 980 | | | 2 BUCKSTONE PLACE | | |
| ELLWOOD CITY, PA, 16117 | | | ASHEVILLE, NC, 28805 | | |
| | IN | SPECTION INFORMAT | TION | | |
| Inspection Date 06/18/2015 | Type Inspection Alteration | Certificate Status Issued | Inspector 59 - Cannon | County BUNCOMBE | 11 B |
| | | VIOLATIONS | | | |
| none | | | | | |
| complainace with current codes. | iting on Corrected Violations Form | when the following corre | | | , |
| Violations pointed out to: Corey/TKE | | | Inspector | | |
| | To make changes to the invoice mailing address please call: 919-733-0372 | | | | |
| THIS IS NOT AN INVOICE | ARC HOSPATALITY PORTFOLIO II/NTC TRES LP An invoice will be mailed to: PO BOX 980 ELLWOOD CITY, PA, 16117 | | | | |