

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 15180-36-5626 State Number 17543

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	E	EQUIPMENT INSPECTED		
State Number: 17543	Type of Unit: Passenger		Floor to Floor: 1 to 3	
Capacity: 2500	Manuf: THYSSEN KRUPP		Speed: 135	
Landings: 3	Installed: 05/06/1998		Rope Size:	
Volts: 208	Complied: 05/07/1998		Entrances: 1	
OWNER	-	OCCUPANT		
ENTITY HOTEL C/O PARKS HOSPITALITY GRP			HAMPTON INN	
1255 CRESCENT GREEN STE 110			105 SPRING FOREST DR	
CARY, NC, 27518			MEBANE, NC, 27302	
CAR1, IVC, 27316			MEDANE, NC, 2750	2
	IN	SPECTION INFORMATION		
Inspection Date 06/29/2015	Type Inspection Routine	Certificate Status Re-issued	Inspector 36 - Kirkman	County ALAMANCE
		VIOLATIONS		
none found				
otify the Elevator Bureau in vomplainace with current codes	writing on Corrected Violations Form	when the following corrections l	have been made in order to bri	ng your equipment into
/iolations pointed out to: office 919-563-5400		Inspector		
	To make changes to the invoice ma			
THIS IS NOT AN				
INVOICE	An invoice will be mailed to: ENTITY HOTEL C/O PARKS HOSPITALITY GRI 1255 CRESCENT GREEN STE 110 CARY NC 27518			