



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  
**16055-12-3047**  
State Number  
**6017**

EQUIPMENT INSPECTED

State Number: <b>6017</b>	Type of Unit: Passenger	Floor to Floor: 1 to 2
Capacity: 3000	Manuf: THYSSEN KRUPP	Speed: 100
Landings: 2	Installed: 09/10/1968	Rope Size:
Volts: 460	Complied: 09/10/1968	Entrances: 1
OWNER	OCCUPANT	
CITY OF BURLINGTON	MUNICIPAL BUILDING	
PO BOX 1358	425 S LEXINGTON AVE	
BURLINGTON, NC, 27216	BURLINGTON, NC, 27215	

INSPECTION INFORMATION

Inspection Date 02/24/2016	Type Inspection Routine	Certificate Status Re-issued	Inspector 12 - Essick	County ALAMANCE
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1

VIOLATIONS

8.6.1.6.5 Provide a class ABC fire extinguisher in machinery space.

Items must be corrected by: 03/25/2016

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: Hal Hayes, 336-516-6709

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:

CITY OF BURLINGTON  
PO BOX 1358  
BURLINGTON, NC, 27216