

INSPECTION REPORT

IMPORTANT: Always use State Number in
any correspondence relating to your equipment
www.nclabor.com/elevator.htm
919-807-2770

Report Number 16350-73-3039 State Number 17241

EQUIPMENT INSPECTED

State Number: 17241	Type of Unit: Passenger	Floor to Floor: 1 to 4
Capacity: 2500	Manuf: OTIS	Speed: 125
Landings: 4	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	

INSPECTION INFORMATION

Inspection Date 12/15/2016	Type Inspection Routine	Certificate Status Re-issued	Inspector 73 - James	County ALAMANCE	1
-------------------------------	----------------------------	---------------------------------	-------------------------	--------------------	---

VIOLATIONS

- 2.27.1.1.2 Put the in car emergency telephone in proper working order.
- 8.6 Place sump pump in proper working order
- 8.6 Make elevator equipment room door self closing self locking
- 8.6 Clean the elevator pit

Items must be corrected by: 02/15/2017

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: maintenance 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:

FCM BURLINGTON LLC
PO BOX 7246
ROCKY MOUNT, NC, 27804