Type of Inspection
New ☒ _____
Annual ☐ _____
Follow-Up _____
(Prev. Inspection Date)
Complaint ☐ _____
Courtesy ☐ _____
Random ☐ _____

CDA&CS, VETERINARY DIVISIO
ANIMAL WELFARE SECTION
1030 MAIL SERVICE CENTER,
RALEIGH, NC 27699-1030
PHONE: 919/715-7111, FAX: 919/733-6431

INDOOR ☒
OUTDOOR ☐
BOTH ☐

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 35.24650 **W:** 80.34860

LICENSE #: 114
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: KITTY CITY
OWNER: PATSY BEEKER PRES.
ADDRESS: 36 S UNION ST CONCORD
TELEPHONE: (704) 795-5219
VMO HUNTER
COUNTY CABARRUS

Number of Primary Enclosures 49 **Animals Present: Dogs** 4 **Cats** 42

Inspector: Mark "X" in each box, if adequate.
Circle each item number, if inadequate.
Use NA if not applicable

STRUCTURE

Housing Facilities
☒ 1. Structure & Repair
☒ 2. Ventilation & Temp.
☒ 3. Lighting
☒ 4. Ceiling, Wall, Floors
☒ 5. Storage
☒ 6. Water Drainage

Primary Enclosures
☐ 7. Structure & Repair
☒ 8. Space
☒ 9. Ventilation & Temp.
☒ 10. Adequate Shelter

SANITATION
☒ 11. Waste Disposal
☒ 12. Odor
☒ 13. Ceiling, Wall, Floors
☒ 14. Primary Enclosures
☒ 15. Equipment & Supplies
☒ 16. Washrooms, Sinks, Basins
☒ 17. Insect/Vermin Control
☒ 18. Building & Grounds

HUSBANDRY
☒ 19. Adequate Feed/Water
☒ 20. Food Storage
☒ 21. Personnel
☒ 22. Ratio of 1:10 personnel to animals if >4 in primary enclosure or common area
☒ 23. Animals' Appearance

SPECIAL ITEMS

Records
☒ 23. Description of Animals
☒ 24. Records/Vet Treatment
☒ 25. Origin/Disposition
☒ 26. Signature (boarding kennel)
☒ 27. Written permission from owner for commingling (doggie daycare)

Transportation
☒ 28. Care in Transit Discussed

Veterinary Care
☒ 28. Isolation Facility
☒ 29. No Signs of Illness/ Treated

☒ **APPROVED** ☐ **DISAPPROVED** Date: MARCH 4, 2010 Time: 14:00

Shelley J. Swaim
Inspector's Signature

Patsy Beeker
Owner/Authorized Agent's Signature

AW-2
Rev. 1/07 White= Office Canary= Inspector Pink= Owner

CDA&CS, VETERINARY DIVISI(
ANIMAL WELFARE SECTION,
1030 MAIL SERVICE CENTER,
RALEIGH, NC 27699-1030
PHONE: 919/715-7111, FAX: 919/733-6431

ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: _____
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: KITTY CITY
OWNER: CONT
ADDRESS:
TELEPHONE: (_____)_____-_____

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
1	A grant has been submitted for new enclosures There are 10 enclosures that are constructed from laminated / melamine finished board. Some of the edging has come off and there is some damage from chewing / scratching - reedge and seal damaged areas of these enclosures. Cages will be replaced by 3/4/11 Facility is clean and there is no evidence of disease in general population Keep working on decluttering back storage / area	
24	Add dosage concentration and initials to treatment records done at time of inspection	

☒ APPROVED ☐ CONDITIONALLY APPROVED ☐ DISAPPROVED Date: 3/4/10 Time: 14:00

Shelley J. Swan
Inspector's Signature

Patsy Beeler
Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

White= Office Canary= Inspector Pink= Owner