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

NCDA&CS, VETERINARY DIVISION
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: 35.27526 **W:** 81.15694

LICENSE #: 10417
TYPE FACILITY: Animal Shelter (Private/Public) ☐ **Boarding Kennel** ☒ **Pet Shop** ☐ **Public Auction** ☐
BUSINESS NAME: THE ANIMAL KEEPERS
OWNER: BERNARD AND PAULETTE BRICE
ADDRESS: 1702 EAST OZARK AVE. GASTONIA
TELEPHONE: (704) 865-0833
VMO SWAIM
COUNTY GASTON

Number of Primary Enclosures 48 **Animals Present: Dogs** 7 **Cats** 1

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
N/A 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)
N/A Written permission from owner for commingling (doggie daycare)

Transportation
N/A Care in Transit Discussed

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

☐ **APPROVED** ☒ **DISAPPROVED** Date: OCT 9, 2007 Time: ~~08:48~~ 13:21

Shelley J. Swaim
Inspector's Signature

Glennella J. Brice
Owner/Authorized Agent's Signature

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

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ANIMAL WELFARE INSPECTION CONTINUTATION PAGE

LICENSE #: 10417
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☒ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: THE ANIMAL KEEPERS
OWNER:
ADDRESS: CONT.
TELEPHONE: (_____)_____-_____

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
1 4	CONCRETE WALKWAYS ARE CRACKED AND UNSEALED PAINT IS PEELING FROM WALLS. ENTIRE BUILDING IS IN VARIOUS STAGES OF DISREPAIR. REPAIR OR REPLACE WALKWAYS AND SEAL OR PAINT MAKING IMPERVIOUS TO MOISTURE.	
5	FACILITY IS CLUTTERED WITH ACCESORIES, TOYS, ETC. CLEAN UP AND ORGANIZATION STORE ACCESSORIES AS TO PREVENT CONTAMINATION - REMOVE CLUTTER	
13 16	DIRTY FEED AND WATER BOWLS STACKED IN BATHROOM - THESE NEED TO BE WASHED AND SANITIZED DAILY	
	OVER ALL SANITATION OF FACILITY POOR AND THERE IS ODOR PRESENT	
7	INSIDE KENNELS #7, 8, 5, 3, 2, 1, 10, 11 & 15 CHAIN LINK GATES ARE DAMAGED. REPAIR OR REPLACE THESE GATES. OUTSIDE KENNES #3, 5, 6, 8, 9 DAMAGED METAL FLASHING EXPOSING SHARP EDGES THAT ARE DANGEROUS AND COULD CAUSE INJURY TO ANIMALS. KENNEL # 6 REMOVE OLD DAMAGED WOOD AND REPLACE WITH MATERIAL IMPERVIOUS TO MOISTURE OUTSIDE KENNELS CHAIN LINK IS DAMAGED - REPLACE OR REPAIR.	
	RECORDS ARE LACKING - OF THE SEVEN DOGS ON PROPERTY ONLY ONE HAD ANY TYPE OF RECORD. MS BRICE STATED ALL THE DOGS EXCEPT "ROXIE" HAD BEEN ABANDONED, LEFT BY CLIENTS. ONE DOG "CAMILE" HAD BEEN AT FACILITY SINCE 1992 "ALL ANIMALS IN A FACILITY ARE SUBJECT TO THE ANIMAL WELFARE ACT REGARDLESS OF OWNERSHIP"	

☐ APPROVED ☒ DISAPPROVED Date: OCT 9, 2007 Time: ~~08:48~~ 13:21

Inspector's Signature

Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

White= Office Canary= Inspector Pink= Owner

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ANIMAL WELFARE INSPECTION CONTINUTATION PAGE

LICENSE #: 10417
TYPE FACILITY: Animal Shelter (Private/Public) □ Boarding Kennel X Pet Shop □ Public Auction □
BUSINESS NAME: THE ANIMAL KEEPERS
OWNER:
ADDRESS: CONT
TELEPHONE: (_____)_____-_____

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
	LEFT COPY OF AWA FOR REVIEW	
	PLEASE HAVE HUSBANDRY/SANITATION AND RECORDS CORRECTED BY	OCT 17, 2007
	BUILDING REPAIRS CORRECTED BY	JAN 1, 2008
	METAL FLASHING REPAIRED BY	OCT 17, 200

□ APPROVED X DISAPPROVED Date: OCT 9, 2007 Time: 13:21

Shelley J. Swain
Inspector's Signature

Glennella J. Brice
Owner/Authorized Agent's Signature

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