Type of Inspection
New □ _____
Annual □ _____
Follow-Up 4/25-6/12-6/30
(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 X

ENTERED

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 35.27675 **W:** 81.05791

LICENSE #: _____
TYPE FACILITY: Animal Shelter (Private/Public) □ **Boarding Kennel** X **Pet Shop** □ **Public Auction** □
BUSINESS NAME: BARK CITY
OWNER: MELANIE STINES
ADDRESS: 812 WOODLAWN AVE BELMONT
TELEPHONE: (704) 820-9772
VMO HUNTER
COUNTY GASTON

Number of Primary Enclosures 8 **Animals Present: Dogs** 13 **Cats** 0

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
X 2. Ventilation & Temp.
X 3. Lighting
X 4. Ceiling, Wall, Floors
X 5. Storage
X 6. Water Drainage

Primary Enclosures
□ 7. Structure & Repair
X 8. Space
X 9. Ventilation & Temp.
X 10. Adequate Shelter

SANITATION

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

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

SPECIAL ITEMS

Records
X 24. Description of Animals
X 25. Records/Vet Treatment
X 26. Origin/Disposition
X 27. Signature (boarding kennel)
X 28. Written permission from owner for commingling (doggie daycare)

Transportation
X 29. Care in Transit Discussed

Veterinary Care
X 30. Isolation Facility
X 31. No Signs of Illness/ Treated

□ **APPROVED** X **CONDITIONALLY APPROVED** □ **DISAPPROVED** Date: 7/10/08 Time: 12:24

[signature] **Inspector's Signature**

Melanie Stines **Owner/Authorized Agent's Signature**

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

NCDA&CS, VETERINARY DIVISION
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: BARK CITY
OWNER: _____
ADDRESS: CONT
TELEPHONE: (_____)_____-_____

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
(1)	REPAIR/REPLACE DAMAGED LATTICE NO DOGS OUT OFF LEAD NO EXCEPTIONS UNTIL AREA IS REPAIRED	
(7)	NO DOGS OVER 20# IN KENNEL #8 UNTIL ELECTRIC OUTET IS RELOCATED	
(1)	REPLACE DAMAGED DOOR FRAME	
(18)	HAIR AND DEBRI ACCUMULATED ON LANDING AND STEPS - CLEAN DAILY	
*		30 DAYS TO CORRECT

☐ APPROVED ☒ CONDITIONALLY APPROVED ☐ DISAPPROVED Date: 7/10/09 Time: 12:24

Shelley Swaine — Inspector's Signature

Melanie Stines — Owner/Authorized Agent's Signature

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