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: 35.13320 **W:** 80.94240

LICENSE #: 10552
TYPE FACILITY: Animal Shelter (Private/Public) ☒ **Boarding Kennel** ☒ **Pet Shop** □ **Public Auction** □
BUSINESS NAME: CONTINENTAL BOARDING
OWNER:
ADDRESS: 2235 TOWNSHIP RD CHARLOTTE
TELEPHONE: (704) 524-0025
VMO HUNTER
COUNTY MECK

Number of Primary Enclosures 140 **Animals Present: Dogs** 64 **Cats** _____

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

Transportation
☒ 29. Care in Transit Discussed

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

☒ **APPROVED** □ **CONDITIONALLY APPROVED** □ **DISAPPROVED** Date: 3/9/09 Time: 14:21

Sheila D Lucas
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 CONTINUATION PAGE

LICENSE #: 10552
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Continental Boarding
OWNER:
ADDRESS: cont
TELEPHONE: ( ) -

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
(6) (1)	Large muddy area in front of "B" drainage is inadequate in this area and there is at least one dog in play area that is muddy - Contractor has been contacted (Mann Contractors) to address drainage issues in this area	
(7)	Primary enclosures are in need of general normal maintenance including but not limited to the following - Paint scratched and damaged from dogs - tile cracked - caulking missing and or damaged - Repair / Reseal Recaulk primary enclosures making impervious to moisture - This is an on-going process - Timeline for repairs will be faxed to this office by 3/13/09	
(11)	Full waste receptacle at back of "B" Kennel where no dogs have been boarded since X-mas - remove waste daily - done	
(22)	Dog ratio 1:15 in small dogs play yard maintain 1:10 - done at time of inspection	
(27)	Signature of person responsible for animal at time of discharge - done	

☒ APPROVED ☐ CONDITIONALLY APPROVED ☐ DISAPPROVED Date: 3/9/07 Time: 14:21

[signature]
Inspector's Signature

[signature]
Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

White= Office Canary= Inspector Pink= Owner