**Type of Inspection**
New ☐
Annual ☒ 8-16-10
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:** 35.04010 **W:** 80.38300

**LICENSE #:** 10567
**TYPE FACILITY:** Animal Shelter (Private/Public) ☐ Boarding Kennel ☒ Pet Shop ☐ Public Auction ☐
**BUSINESS NAME:** Charlotte Kennels
**OWNER:** Nicole Moore
**ADDRESS:** 5000 Sardis Rd. Indian Trail NC
**TELEPHONE:** (704) 821-1318
**VMO** Hunter
**COUNTY** Union

**Number of Primary Enclosures** 49 **Animals Present: Dogs** 29 **Cats** 7

**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

Date: 8-16-10 Time: 1:10pm

☒ **APPROVED** ~~☐ CONDITIONALLY APPROVED~~ ☐ **DISAPPROVED**

E. Lamer
**Inspector's Signature**

Audrey M. Randazzo
**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 #: 10567
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☒ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Charlotte Kennels
OWNER:
ADDRESS: (CONT)
TELEPHONE: (_____)_____-_____

| Item Number | Explanation of Inadequacy (circled items above) And Recommendation For Compliance | Date Corrections Must Be Completed |
|---|---|---|
| | Last Inspection 8-13-09<br>- Seal walkways & Bridge<br>- Maintain Grass Areas.<br><br>Today's Inspection:<br>#22 - No animals in common area @ time of inspection to view Ratio's.<br><br>Temperature is 70° today in kennel area.<br>No inadequacies noted. | |

☒ APPROVED ~~☐ CONDITIONALLY APPROVED~~ ☐ DISAPPROVED Date: 2-16-10 Time: 1:10pm

E. Garner
Inspector's Signature

Audrey M. Randazzo
Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

White= Office Canary= Inspector Pink= Owner