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

GPS Coordinates - N: 35.45868 W: 82.51902

LICENSE #: 10461
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☑ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: ARDEN TLC KENNEL
OWNER: JERRY SHEVICK
ADDRESS: 5 AIRPORT RD ARDEN
TELEPHONE: (828) 687-7080
VMO: Swain
COUNTY: Buncombe

Number of Primary Enclosures 60
Animals Present: Dogs 22 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
☑ 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

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)

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

Transportation

☑ 28. Care in Transit Discussed

Veterinary Care

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

☑ APPROVED ☐ DISAPPROVED

Date: 10/8/07 Time: 10:55

Inspector’s Signature

Owner/Authorized Agent’s Signature

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

PAGE 1 OF 2
**ANIMAL WELFARE INSPECTION CONTINUATION PAGE**

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**BUSINESS NAME:** ARDEN TLC KENNEL  
**OWNER:** CONT  
**ADDRESS:** CONT  
**TELEPHONE:** (___)___-_______

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Explanation of Inadequacy (circled items above) And Recommendation For Compliance</th>
<th>Date Corrections Must Be Completed</th>
</tr>
</thead>
<tbody>
<tr>
<td>①</td>
<td>Some of the 3/4 round molding has come loose from wall and floor. These kennels are currently being repaired.</td>
<td>1-08</td>
</tr>
<tr>
<td>⑦</td>
<td>Mice droppings noted in small dog kennels - review rodent/pest control program and adjust to control rodents</td>
<td>1-08</td>
</tr>
<tr>
<td>⑧</td>
<td>Store open bags of food in sealed containers</td>
<td>Completed 10-8-07</td>
</tr>
<tr>
<td>⑨</td>
<td>Signature needed at time of check out</td>
<td>Completed 10-8-07</td>
</tr>
</tbody>
</table>

**APPROVED**  □ DISAPPROVED  

**Date:** 10/8/2007  **Time:** 10:55  

**Inspector’s Signature:** [Signature]  
**Owner/Authorized Agent’s Signature:** [Signature]

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**PAGE 2 OF 2**