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° 50' 44" W: 82° 37' 55"

LICENSE #: [Redacted]
TYPE FACILITY: Animal Shelter (Private/Public) ☑ Boarding Kennel ☑ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Fairview Kennels
OWNER: Kay + Bob Sutter
ADDRESS: 1923 Charlotte Hwy Fairview, NC
TELEPHONE: (828) 628-1997
VMO Hunter
COUNTY Buncombe

Number of Primary Enclosures 45 Animals Present: Dogs 18 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

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: 2/1/07 Time: 11:40

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

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

**LICENSE #: 10161**
**TYPE FACILITY: Animal Shelter (Private/Public) [X] Boarding Kennel [ ] Pet Shop [ ] Public Auction [ ]**
**BUSINESS NAME: Fairview Kennels**
**OWNER: Kay and Bob Sitter**
**ADDRESS: 1923 Charlotte Hwy**
**TELEPHONE: (325) 628 - 1997**

<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>#7 - Concrete in some not All primary enclosures need to be sealed. Some areas of all original cement that is impermeable to moisture, and all chainlink needs to be free of hair. All records such as shots, treatment sheets and description of animals – looks great. Sign-out sheet was also in place and looked great. (Very Organized Facility)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**APPROVED □ CONDITIONALLY APPROVED □ DISAPPROVED**

- **Date:** 2/7
- **Time:** 11:40

**Inspector’s Signature**

**Owner/Authorized Agent’s Signature**

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**AW-2**
**Rev. 1/07**

- **White:** Office
- **Canary:** Inspector
- **Pink:** Owner

**PAGE 2 OF 2**