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° 37' 22" W: 80° 7' 49.2"

LICENSE #: 10709

TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Petco #2737

OWNER:
ADDRESS: 8070 Concord Mills Rd Concord
TELEPHONE: (858) 457-2000
VMO Hunter
COUNTY CABARRUS

Number of Primary Enclosures 4 Animals Present: Dogs 0 Cats 3

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

Transportation
☒28. Care in Transit Discussed

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

☐ APPROVED ☐ DISAPPROVED

Date: 2/20/08
Time: 11:48

Inspector’s Signature

Owner/Authorized Agent’s Signature

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

PAGE 1 OF 2
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**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>25</td>
<td>Maintain copy of disposition paperwork at facility. Paperwork must be maintained for a year</td>
<td></td>
</tr>
</tbody>
</table>

**APPROVED**  
**DISAPPROVED**

Date: 2/20/08  
Time: 11:45

**Inspector’s Signature:**

**Owner/Authorized Agent’s Signature:**

AW-2  
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