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: 35.38992 W: 80.62042

LICENSE #: 10687
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☑ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: The Dog Park of Concord
OWNER: Lyndia Fentress & Jami Bent
ADDRESS: 111 Commercial Dr, Concord
TELEPHONE: (704) 789-7275
VMO: Swamp
COUNTY: Cabarrus

Number of Primary Enclosures 24 Animals Present: Dogs 20 Cats 0

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: Nov 7, 2007 Time: 9:21

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**

**LICENSE #: 10687**
**TYPE FACILITY: Animal Shelter (Private/Public) □ Boarding Kennel □ Pet Shop □ Public Auction □**
**BUSINESS NAME:** THE DOG PARK OF CONCORD

**OWNER:**
**ADDRESS:**
**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><strong>DAMAGED CHAIN LINK IN SEVERAL INDOOR PRIMARY ENCLOSURES - REPLACE - WILL DO TODAY</strong></td>
<td>Nov 8, 2007</td>
</tr>
<tr>
<td>2</td>
<td><strong>MODIFY IN SHEET TO INCLUDE CONCENTRATION AND ACTUAL TIME ADMINISTERED - DONE AT TIME OF INSPECTION</strong></td>
<td></td>
</tr>
</tbody>
</table>

**APPROVED**
**DISAPPROVED**

**Date:** Nov 7, 2007  **Time:** 9:21

**Inspector’s Signature**

**Owner/Authorized Agent’s Signature**

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

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