ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 35.27526 W: 81.15696

LICENSE #: 10417
TYPE FACILITY: Animal Shelter (Private/Public) □ Boarding Kennel X Pet Shop □ Public Auction □
BUSINESS NAME: THE ANIMAL KEEPERS
OWNER: BERNARD AND PAULEtte BREIT
ADDRESS: 1702 E. OZARK AVE GASTONIA
TELEPHONE: (704) 865-0833
VMO Swaim
COUNTY Gaston

Number of Primary Enclosures 48 Animals Present: Dogs 7 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
3. 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 □

HUSNADRY

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 □

Date: Oct 15, 2007 Time: 13:40

APPROVED □ DISAPPROVED □

Inspector’s Signature: Swaim
Owner/Authorized Agent’s Signature: Breit

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

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ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: 10417
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☑ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: THE ANIMAL KEEPERS
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>04</td>
<td>Property Owner is in process of repairing concrete &amp; fencing - damaged metal flashing has been replaced.</td>
<td></td>
</tr>
<tr>
<td>05</td>
<td>Clutter and accessories have been removed and or stored properly. Records have been updated all are current and in Ms. Bric's name.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>No dirty food or water receptacles. Continue with building repairs - complete by Jan 1, 2008 - if done before then call and I will re-inspect at that time.</td>
<td></td>
</tr>
</tbody>
</table>

☑ APPROVED ☐ DISAPPROVED

Date: Oct 15, 2007 Time: 13:40

Sherry D. Swann

Inspector's Signature

Gwendolyn J. Brice

Owner/Authorized Agent’s Signature

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