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: 35.42478 W: 80.91890

LICENSE #: 10513
TYPE FACILITY: Animal Shelter (Private/Public) □ Boarding Kennel □ Pet Shop □ Public Auction □
BUSINESS NAME: THE MEADOWS BIRD & BISCUIT
OWNER: __________________________
ADDRESS: 15020 BROWN MILL RD HUNTERSVILLE
TELEPHONE: (704) 875-8608
VMO HUNTERC
COUNTY MECK

Number of Primary Enclosures 84 Animals Present: Dogs 63 Cats 2

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: FEB 20 2008 Time: 10:00

Inspector’s Signature

Owner/Authorized Agent’s Signature

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

PAGE 1 OF
ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: 
TYPE FACILITY: Animal Shelter (Private/Public) □ Boarding Kennel □ Pet Shop □ Public Auction □ 
BUSINESS NAME: THE MICHIGANS BED & BEAST
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></td>
<td>Some of the unused parts of the wire have been removed after the pecking order was established. New wire is needed.</td>
<td>Feb 29, 2008</td>
</tr>
</tbody>
</table>

X APPROVED □ DISAPPROVED Date: FEB 29, 2008 Time: 10:00

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

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

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