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°20'53" W: 80°36'25"

LICENSE #: 10780
TYPE FACILITY: Animal Shelter (Private/Public) □ Boarding Kennel □ Pet Shop □ Public Auction □
BUSINESS NAME: Kimo Inc DBA All Wags
OWNER: Karen Gates
ADDRESS: 2301 S Blvd Charlotte
TELEPHONE: (704) 527-9247
VMO □ COUNTY □

Number of Primary Enclosures 12 Animals Present: Dogs 46 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

SPECIAL ITEMS

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

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

28. Care in Transit Discussed

VETERINARY CARE

28. Isolation Facility
29. No Signs of Illness/Treated

APPROVED □ DISAPPROVED

Date: Dec 12, 2008 Time: 12:27

Inspector’s Signature

Owner/Authorized Agent’s Signature

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

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**ANIMAL WELFARE INSPECTION CONTINUATION PAGE**

**LICENSE #:**

**TYPE FACILITY:** Animal Shelter (Private/Public)  □ Boarding Kennel  □ Pet Shop  □ Public Auction  □

**BUSINESS NAME:**

**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>10</td>
<td>Missing baseboards and chipping/popping paint in some areas - Replace/repaint baseboards and paint/ seal concrete, floors and masonry</td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>Hair debris build up outside around lattice - remove and keep area clean</td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Makesure all open food is stored in sealed containers</td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Add color markings to animal descirptions</td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Make sure all vaccination records are updated</td>
<td>Jan 1, 2007</td>
</tr>
</tbody>
</table>

**APPROVED**

**CONDITIONALLY APPROVED**

**DISAPPROVED**

**Date:** 1/1/07  **Time:** 12:27

**Inspector's Signature:**

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

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