

Type of Inspection
 New
 Annual 7-7-10
 Follow-Up _____
 (Prev. Inspection Date)
 Complaint
 Courtesy
 Random

NCDA&CS, VETERINARY DIVISION
 ANIMAL WELFARE SECTION
 1030 MAIL SERVICE CENTER,
 RALEIGH, NC 27699-1030
 PHONE: 919/715-7111, FAX: 919/733-6431

INDOOR
 OUTDOOR
 BOTH

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 35.23959 W: 80.41674

LICENSE #: 10118
 TYPE FACILITY: Animal Shelter (Private/Public) Boarding Kennel Pet Shop Public Auction
 BUSINESS NAME: Tag'm Kennels
 OWNER: Winn Mathis
 ADDRESS: 126 Kennel Rd. Stanfield NC
 TELEPHONE: (704) 888-4637
 VMO Hunter
 COUNTY Stanley

Number of Primary Enclosures 18 Animals Present: Dogs 15 Cats 0

**Inspector: Mark "X" in each box, if adequate.
 Circle each item number, if inadequate.
 Use NA if not applicable**

STRUCTURE

SANITATION

SPECIAL ITEMS

Housing Facilities

- 1. Structure & Repair
- 2. Ventilation & Temp.
- 3. Lighting
- 4. Ceiling, Wall, Floors
- 5. Storage
- 6. Water Drainage

- 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

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)

Primary Enclosures

- 7. Structure & Repair
- 8. Space
- 9. Ventilation & Temp.
- 10. Adequate Shelter

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

Transportation

- 29. Care in Transit Discussed

Veterinary Care

- 30. Isolation Facility
- 31. No Signs of Illness/Treated

APPROVED ~~CONDITIONALLY APPROVED~~ DISAPPROVED

Date: 11:43am Time: 7-7-10

E. Sooner
 Inspector's Signature

Winn H. Mathis
 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 #: 10118
 TYPE FACILITY: Animal Shelter (Private/Public) Boarding Kennel Pet Shop Public Auction
 BUSINESS NAME: Jagim Kennels
 OWNER: _____
 ADDRESS: _____ (CONT)
 TELEPHONE: () - -

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
	Last inspection 3-11-10: No inadequacies noted.	
	Today's inspection: Cot room is currently being remodeled. Owners have also replaced some flooring with new tile.	
	#2- Temp @ inspection was 83° - keep between 60-80° - A/C turned up while I was present.	
	#7- replace chewed/damaged resting surfaces as necessary - cracks in concrete in various places need to be kept sealed.	
	#18- Keep Grounds clean & clutter free. (weed eat, mow, keep accessories tidy).	

APPROVED CONDITIONALLY APPROVED DISAPPROVED Date: 11:43am Time: 7-7-10

 Inspector's Signature

 Owner/Authorized Agent's Signature