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: 35.04010 W: 80.38300

LICENSE #: 10567
TYPE FACILITY: Animal Shelter (Private/Public) □ Boarding Kennel ☑ Pet Shop □ Public Auction □
BUSINESS NAME: Charlotte Kennels
OWNER:
ADDRESS: 5000 SARDIS RD INDIAN TRAIL
TELEPHONE: (704) 821-1318
VMO Hunter
COUNTY Union

Number of Primary Enclosures
Animals Present: Dogs 54 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
☑ 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
☐ 29. Care in Transit Discussed

Veterinary Care
☒ 30. Isolation Facility
☐ 31. No Signs of Illness/Treated

APPROVED ☑ CONDITIONALLY APPROVED □ DISAPPROVED

Date: 6/2/09 Time: 12:21

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

PAGE 1 OF 2
<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>0</td>
<td>SEAL WALKWAYS AND BRIDGE</td>
<td></td>
</tr>
<tr>
<td>0</td>
<td>MAINTAIN BRASS AREAS AS NEEDED</td>
<td></td>
</tr>
</tbody>
</table>

**LICENSE #: 105207**

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

**BUSINESS NAME:** CHARLOTTE KENNELS

**OWNER:**

**ADDRESS:**

**TELEPHONE:** (____) _______

**APPROVED** ☑

**CONDITIONALLY APPROVED** ☐

**DISAPPROVED** ☐

**Date:** 8/1/07

**Time:** 12:37

Inspector's Signature: [Signature]

Owner/Authorized Agent’s Signature: [Signature]

White= Office

Canary= Inspector

Pink= Owner

PAGE 2 OF 2