Type of Inspection
New ☐
Annual ☒ 7-14-10
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 ☒

ENTERED 7-15-10

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 35.14113 **W:** 80.49910

LICENSE #: 10655
TYPE FACILITY: Animal Shelter (Private/Public) ☐ **Boarding Kennel** ☒ **Pet Shop** ☐ **Public Auction** ☐
BUSINESS NAME: City Paws USA
OWNER: Sherri West
ADDRESS: 1100 N. Tryon St. Charlotte NC
TELEPHONE: (704) 338-9663
VMO Hunter
COUNTY Mecklenburg

Number of Primary Enclosures 55 **Animals Present: Dogs** 7 **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
- ☒ 9. Ventilation & Temp.
- ☒ 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: 7-14-10 Time: 2:46pm

E. Haene
Inspector's Signature

Sherri R West
Owner/Authorized Agent's Signature

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

NCDA&CS, VETERINARY DIVISION
ANIMAL WELFARE SECTION,
1030 MAIL SERVICE CENTER,
RALEIGH, NC 27699-1030
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ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: 10655
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☒ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: City Paws, USA
OWNER:
ADDRESS: (CONT)
TELEPHONE: (_____)_____-_____

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
	Last Inspection: 1-26-09 (By file)	
	- Needed to repair baseboards	
	- Store All food in sealed Containers	
	- Follow Program of Veterinary Care & make sure all animals UTD on vaccines.	
	- Signature Form needed.	
	Today's Inspection.	
	#4- Keep all cracks in concrete sealed.	

☒ APPROVED ~~☐ CONDITIONALLY APPROVED~~ ☐ DISAPPROVED Date: 7-14-10 Time: 2:46pm

E Sarner
Inspector's Signature

P Sherri West
Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

White= Office Canary= Inspector Pink= Owner