

ANIMAL PROTECTION COMPLAINT FORM

TO: Ray PRIORITY
FROM: ATLANTA OFFICE DATE:

WE HAVE RECEIVED A COMPLAINT FROM:

NAME Bigi Ritter PHONE NUMBER (220-) 594-7984

ADDRESS

CITY Roswell ZIP 30075 COUNTY Fulton

COMPLAINT WAS LODGED AGAINST: Keystone Kennel P661
7560 Wallace Tatum Rd 31700
68476

NAME Patty Ruffo PHONE NUMBER ? ()

ADDRESS KEYSTONE KENNEL 7560 WALLACE TATUM ROAD

CITY Cumming ZIP COUNTY Fresh

DIRECTIONS

NATURE OF COMPLAINT: lack of food/water; dogs have died
and not disposed of properly; some have dermatitis
and other health problems; garage area has no
ventilation for puppies + adults.

DISPOSITION OF COMPLAINT:

Determined complaint to be local responsibility	YES <u> </u>	NO <u> </u>
Determined complaint to be animal cruelty	YES <u> </u>	NO <u> </u>
Complaint pending for further investigation or reinspection	YES <u>✓</u>	NO <u>9-2-99</u>
Complaint closed	YES <u> </u>	NO <u> </u> DATE <u> </u>

PRE-LICENSE INSPECTION
 CHANGE
 DELETE

DEPARTMENT OF AGRICULTURE
ANIMAL PROTECTION
 Inspection Report

ROUTINE
 RE-INSPECTION
 COMPLAINT
 MISC. INSPECTION

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DATE: 9-2-99

Establishment Name: Keystones Kennel

Begin Time: 13:15 AM/PM

Address: 7560 Wallace Interm Rd

Complete Time: 15:30 AM/PM

City: Cumming Zip Code: 30130 County: Forsyth

License #: P 661 Phone #: 770-205-7892 Establishment #: 68476

Inspector Name: Ray DeJure Inspector #: 2201

ANIMAL SHELTER BIRD DEALER PET DEALER KENNEL

Premise Requirements

	*Yes	*No	*N/A		*Yes	*No	*N/A
Adequate food & water	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pest control	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Adequate temperature control	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Record keeping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adequate ventilation	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Sanitation	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Current license displayed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Selling of injured, diseased, or abnormal animal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Classification and separation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Shelter from cold, rain, snow or sunlight	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drainage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Space requirements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire extinguishing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Storage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Housekeeping	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Structural strength	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interior surfaces	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Tethering	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lighting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Waste disposal	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Minimum age to sell	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

*Yes - met all elements of the particular requirement
 *No - failed to meet one or more elements of the particular requirement and must be explained in remarks
 *N/A - not applicable to the establishment

REMARKS: Received a complaint on this establishment for:

- 1) dogs having a lack of food and water;
- 2) puppies have died and remains were not properly disposed
- 3) animals have dietary and other health problems
- 4) garage area has no or little ventilation

Upon my arrival I found no one at home. I

N/A

Owner Manager Employee Signature

Ray DeJure
 Inspector's Signature

(additional remarks on back)