

6) Please indicate the type of ownership by checking appropriate blank.

City _____ County _____ Corporation _____ Animal Welfare Organization _____ Partnership _____ Individual

Other (explain) _____

7) List the name and address of all officers of the corporation, partners, or members of the organization (attach additional sheet, if necessary):

<u>NAME</u>	<u>TITLE</u>	<u>ADDRESS</u>
N/A		

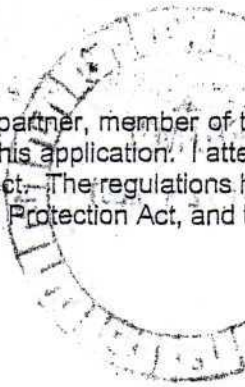
8) Designate the applicant's registered agent for service of process including the agent's name and address: (if none indicate self): Self

9) Please indicate in the space below whether you as an individual, any partner, any member of the organization, or any officer of the corporation, has been convicted of a felony, or found in violation of any law, rule, regulation or quarantine administered by or through the Georgia Department of Agriculture. If your answer is yes to the above question, please describe the conviction or violation. NO

10) If operating another pet related business at a different location, additional names and location of these businesses must be listed. This would include breeding and raising of pet animals at your residence. (Attach additional sheet, if necessary):

<u>NAME</u>	<u>ADDRESS</u>
N/A	

As owner, partner, member of the organization, officer of the corporation or manager of the operation, I am duly authorized to sign this application. I attest to the fact that the foregoing information documented on this application is true, complete and correct. The regulations have been read and the premise, subject to be licensed, meets all requirements of the Georgia Animal Protection Act, and the Rules and Regulations promulgated thereunder.



Patricia McCarty Signature of Authorized Person owner Title

PATRICIA McCarty Print or type Name of Signatory

(770) 479-5344 Business Telephone Number same Home Telephone Number

Previous License Number July 17, 2001 Date of Application

Pg 19

- PRE-LICENSE INSPECTION
- CHANGE
- DELETE

**DEPARTMENT OF AGRICULTURE
ANIMAL PROTECTION
Inspection Report**

- ROUTINE
- RE-INSPECTION
- COMPLAINT
- MISC. INSPECTION

Page 1-3

Page 20

DATE: 7-12-01
 Establishment Name: Keystone Kennels Begin Time: 14:45
 Address: 5717 Cumming Hwy Complete Time: 16:15
 City: Canton Zip Code: 30114 County: Cherokee
 License #: pending Phone #: 770-479-5344 Establishment #: -
 Inspector Name: Lay De Luna Inspector #: 2201

ANIMAL SHELTER BIRD DEALER PET DEALER KENNEL

Requirements

	<i>*Yes</i>	<i>*No</i>	<i>*N/A</i>		<i>*Yes</i>	<i>*No</i>	<i>*N/A</i>
1. Adequate food	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	13. Pest control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Adequate water	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	14. Record keeping	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Adequate temperature control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	15. Sanitation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Adequate ventilation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	16. Selling of injured/diseased/abnormal animal	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Current license displayed	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	17. Shelter from cold, rain, snow or sunlight	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Classification and separation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18. Space requirements	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Drainage	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	19. Storage	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Fire extinguishing	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	20. Structural strength	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9. Housekeeping	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	21. Tethering	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10. Interior surfaces	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	22. Waste disposal	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Lighting	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	23. Euthanasia	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
12. Minimum age to sell	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	24. Humane Care	<input checked="" 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
**N/A* - not applicable to the establishment

REMARKS: This is a new facility that breeds and sells various breeds of dogs. The dogs are kept in (13) various size runs from approx 8'x20'x6' up to 12'x20'x6'. The runs are chain link w/ dirt or wood flooring and are

Patricia McCarty
 I have read and understand the contents of this report
 Signature Owner Manager Employee

Lay De Luna
 Inspector's Signature

(additional remarks on back)

located outside. There is also a whelping building that is going through renovation that will contain (10-15) various size wire cages for puppies and expectant mothers. Currently there are (10) cages inside the home while the renovation is taking place.

1/2 - Food and water are both available via free choice, and both are changed or replenished during the day

3/4 - Whelping building has a wood heater, air conditioning and fans for temperature control and ventilation

5 - N/A License being applied for today

6 - Dogs are kept separate according to species and sex except for breeding purposes

7 - N/A Drains are not connected to runs or enclosures

8 - Hand held fire extinguisher is used as well as detector.

9 - The building and surroundings are in a good state of repair and free of trash and debris

10 - Interior surfaces are constructed of concrete and/or metal trays which makes the areas impervious to moisture

11 - Light available via windows and fluorescent fixtures.

12 - Only weaned dogs will be offered for sale.

13 - Owner conducts their own pest control with use of sprays.

14 - Records for sales / purchases are kept on ACC file system.

Records are in a very accessible and organized file, and are updated. A copy of sales contract is attached, however,

I suggested owner to lower contract health from 7 to 3 days for various reasons. All dogs are updated with vaccinations and rabies shots. Dr.

is used for medical care.