

## Georgia Department of Agriculture Companion Animal/Equine Division

19 Martin Luther King Jr. Dr. SW, Rm. 122 Atlanta, Georgia 30334

Phone: 1-404-656-4914

Website: <a href="http://agr.georgia.gov/">http://agr.georgia.gov/</a> Inspection ID 143119

## **Animal Protection Inspection Report**

|  |                      |                                   |                         | AIII                | IIIc  | ai Protec              | LIOII                   | Tiishe                | CUI                       | OII F               | Kepoi                            | L                      |                              |                    |      |
|--|----------------------|-----------------------------------|-------------------------|---------------------|---|------------------------|-------------------------|-----------------------|---------------------------|---------------------|----------------------------------|------------------------|------------------------------|--------------------|------|
| Inspection ID Inspec                     |                      |                                   | pection Reason          |                     |   | Inspection Date        |                         | Inspection Start Time |                           |                     | Inspection End Time              |                        |                              | Inspector Name     |      |
|  |                      |                                   | ULAR/ROUTI<br>NSPECTION |                     |   | 7/24/2025              |                         | 12:30 PM              |                           |                     | 1:15 PM                          |                        |                              | Gabby Brewer       |      |
| EST NO EST NAME                          |                      |                                   |                         |                     |   |                        | Туре                    |                       | Туре                      |                     |                                  |                        | License No                   |                    |      |
| 16093 WALKER COL                         |                      |                                   |                         | COU                 | NTY ANIMA   | ELTER ANII             |                         | ANIM                  | MAL SHELTER               |                     | 3316093                          |                        | 093                          |                    |      |
| Physical Address Physical Address        |                      |                                   |                         | Phys                | sical City  | Physical State         |                         |                       | Ph                        | sical Zip Code Coun |                                  | ounty                  |                              |                    |      |
| 5488 N Marble Top Rd Ch                  |                      |                                   |                         | Chi                 | ckamauga  | GA                     |                         |                       | 30707                     |                     | V                                | WALKER                 |                              |                    |      |
| Requireme                                | nts Deta             | ils                               |                         |                     |   |                        |                         |                       |                           |                     |                                  |                        |                              |                    |      |
| Premises Current License Displayed  Pass |                      |                                   | cense Housekee          |                     | ping  | Lighting               | Adequ<br>Temp           | iate<br>erature Contr | Adequi<br>Control Ventila |                     |                                  | Fire Extingu<br>Device | Fire Extinguishing<br>Device |                    |      |
|  |                      |                                   | Pass                    |                     |   | Pass                   | Pass                    |                       |                           | Pass                |                                  | Pass                   |                              |                    |      |
| Enclosures                               | Space<br>Requirement |                                   |                         | Interior<br>Surface |   | Structural<br>Strength | Shelte                  | Shelter / Elements    |                           |                     | ge                               |                        |                              | _                  |      |
| Pass                                     |                      |                                   | Pass                    |                     |   | Pass                   | Pass                    | ass                   |                           |                     |                                  |                        |                              |                    |      |
| Perfomance                               | nce Record Keeping   |                                   | S                       | Storage             |   | Pest Control           | Sanita                  | ition                 | Waste Disposal            |                     |                                  |                        |                              |                    |      |
|  | Pass                 |                                   | Р                       | Pass                |   | Pass                   | Pass                    | Pass                  |                           |                     |                                  |                        |                              |                    |      |
| Animal Care                              | Class<br>Separation  | Adequate tion Food Adequate Water |                         |                     | Selling or Adopting<br>Injured or Diseased of<br>Abnormal Animals |                        | Minimum<br>Age          | Tet                   | thering                   | Euthanas            | ia Humane<br>Care                | Nega<br>Cogg           |                              | Evacuation<br>Plan |      |
|  | Pass                 | Pa                                | ss                      | Pass                |   | Pass                   |                         | Pass                  | Pas                       | ss                  | Pass                             | Pass                   | N/A                          |                    | Pass |
| Companior                                | Animal               | Detai                             | ls                      | •                   |   |                        |                         | •                     |                           |                     |                                  | •                      |                              |                    |      |
| Approximate Number of Number of Animals  |                      |                                   | Num                     | nber of S           | stall/E   | nclosure               | Number of Breeding Anir |                       |                           | mals                | Number of Monthly Bird Inventory |                        |                              | nventory           |      |
| 158                                      |                      |                                   |                         |                     |   |                        |                         |                       |                           |                     |                                  |                        |                              |                    |      |
| Follow Up                                | Status In            | forma                             | tion                    |                     |   |                        |                         |                       |                           |                     |                                  | •                      |                              |                    |      |
| Follow Up Date                           |                      |                                   | Follo                   | ow Up Re            | eason   | <u> </u>               | Follow Up Duration      |                       |                           |                     | Animal Types                     |                        |                              |                    |      |
| N/A                                      |                      |                                   |                         |                     |   |                        |                         |                       |                           |                     |                                  |                        |                              |                    |      |
| Follow Up                                | Notes                |                                   |                         |                     |   |                        | •                       |                       |                           |                     |                                  |                        |                              |                    |      |
|  |                      |                                   |                         |                     |   |                        |                         |                       |                           |                     |                                  |                        |                              |                    |      |
| Quarantine                               | Informa              | ition                             |                         |                     |   |                        |                         |                       |                           |                     |                                  |                        |                              |                    |      |
| Stop Order                               | Informa              | tion                              |                         |                     |   |                        |                         |                       |                           |                     |                                  |                        |                              |                    |      |
| Disease type                             |                      |                                   |                         |                     |   |                        |                         |                       |                           |                     |                                  |                        |                              |                    |      |
|  |                      |                                   |                         |                     |   |                        |                         |                       |                           |                     |                                  |                        |                              |                    |      |
| Violation II                             | nformati             | on                                |                         |                     |   |                        |                         |                       |                           |                     |                                  |                        |                              |                    |      |



Čommissioner

## Georgia Department of Agriculture Companion Animal/Equine Division

19 Martin Luther King Jr. Dr. SW, Rm. 122 Atlanta, Georgia 30334

Phone: 1-404-656-4914

Website: <a href="http://agr.georgia.gov/">http://agr.georgia.gov/</a>

Inspection ID

143119

| ı | commissioner  |                                       |            |           |                                 |
|---|---------------|---------------------------------------|------------|-----------|---------------------------------|
|   | Inspection ID | Category                              | Issue Date | RIse Date | Detail                          |
|   | 110353        | Drainage 40-13-13<br>04 (1)(b)        | 3/14/2023  | 7/24/2025 | See body of report for details. |
|   | 110353        | Structural Strength 40-13-1304 (1)(o) | 3/14/2023  | 7/24/2025 | See body of report for details  |

## **Inspection Comments**

Reported to facility for unannounced routine inspection for GDA Animal Shelter License:

Walker County Animal Shelter Director Melissa and Walker County Animal Services Director Bailey were onsite upon inspection and accompanied me for walk through of entire facility. Current GDA license displayed and expires 01/2026. DEA license is current and displayed under Dr. Sumner. Euthanasia records and substance storage appear to be in accordance with GDA CAE rules and regulations. Facility and enclosures appear clean and in good repair. No foul odors upon inspection. Indoor area was approximately 71 degrees Fahrenheit according to thermostat onsite. Outdoor kennel runs are available and appear clean and in a good state of repair. Current charged fire extinguishing devices located throughout premise. Incoming and outgoing records appear complete and current with required information. Foster Home records appear to be in compliance with GDA CAE Rules and regulations. There is currently 1 female cat and a litter of 3 kittens in an active and approved foster. There are 110 canines and 48 felines on site at this time. All animals on premises at time of inspection appear alert and healthy. All animals appear to be receiving humane and adequate care at time of inspection. Evacuation plans were made available upon inspection.

Facility appears to be in compliance with GDA rules and regulations at time of inspection. Facility passed routine inspection. Report is being emailed to facility.