Type of Inspection
New ☐ _____
Annual ☒ _____
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 ☒

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 35.61658 **W:** 82.36089

LICENSE #: 10536
TYPE FACILITY: Animal Shelter (Private/Public) ☐ **Boarding Kennel** ☒ **Pet Shop** ☐ **Public Auction** ☐
BUSINESS NAME: Bed and Biscuit
OWNER: Ellen Frost
ADDRESS: 1420 North Fork Rd Black Mt
TELEPHONE: (828) 669-6578
VMO Swaim
COUNTY Buncombe

Number of Primary Enclosures 55 **Animals Present: Dogs** 38 **Cats** 3

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
N/A 22. Ratio of 1:10 personnel to animals if >4 in primary enclosure or common area
☐ 23. Animals' Appearance

SPECIAL ITEMS

Records
☒ 23. Description of Animals
☒ 24. Records/Vet Treatment
☒ 25. Origin/Disposition
○ 26. Signature (boarding kennel)
N/A 27. Written permission from owner for commingling (doggie daycare)

Transportation
N/A 28. Care in Transit Discussed

Veterinary Care
○ 28. Isolation Facility
☒ 29. No Signs of Illness/ Treated

☒ **APPROVED** ☐ **DISAPPROVED** Date: Oct 29, 2007 Time: 8:28

Shelley J. Swaim
Inspector's Signature

Elizabeth L. Donaldson
Owner/Authorized Agent's Signature

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

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ANIMAL WELFARE INSPECTION CONTINUTATION PAGE

LICENSE #: 10536
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☒ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: BED & BISCUIT
OWNER: CONT
ADDRESS:
TELEPHONE: (_____)_____-_____

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
(7)	DAMAGED CHAINLINK KENNELS #22 #30 #28 REPAIR OR REPLACE	1/2008
(20)	STORE ALL OPEN FEED IN SEALED CONTAINERS	OCT 30, 2007
(7)	CONCRETE IN OUTSIDE KENNELS IS CHIPPED AND CRACKED REPAIR AND RESEAL CONCRETE IN THESE KENNELS	1/2008
(28)	NO ISOLATION FACILITY DESIGNATED - UTILITY ROOM DESIGNATED FOR ISO DURING INSPECTION	

☒ APPROVED ☐ DISAPPROVED Date: Oct 29, 2007 Time: 8:28

Shelley J. Swain
Inspector's Signature

Elizabeth J. Donaldson
Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

White= Office Canary= Inspector Pink= Owner