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 ☒

ENTERED

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 35.62561 **W:** 82.67552

LICENSE #: 10365
TYPE FACILITY: Animal Shelter (Private/Public) ☐ **Boarding Kennel** ☒ **Pet Shop** ☐ **Public Auction** ☐
BUSINESS NAME: Country Side Kennels
OWNER: Connie Wise
ADDRESS: 15 Butterfly Dr. Leicester, N.C.
TELEPHONE: (828) 683-5944
VMO Hunter
COUNTY Buncombe

Number of Primary Enclosures 33 **Animals Present: Dogs** 3 **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
- NA ☒ 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)
- NA 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: 12/1/08 Time: 12:45 PM

Mary Stamy
Inspector's Signature

Connie Wise
Owner/Authorized Agent's Signature

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

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ANIMAL WELFARE INSPECTION CONTINUATION PAGE

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OWNER: Connie Wise
ADDRESS: 15 Butterfly Dr. Leicester, N.C.
TELEPHONE: (828) 683 - 9944

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
#7	Cracks in floors in the inside Kennel Runs needs to be Sealed. Some chainlink along bottoms of outside runs needs repair or replace corners Along bottom of gates Also need to be replaced.	
#25	Med-Sheets need to be in place with what Type of meds, How much is given, what time, Date, and Intials of who gives meds	
#26	A Sign-out sheet Also needs to be in place with Date, Time, name of Animal, and who picks Animal up.	

☐ APPROVED ☒ CONDITIONALLY APPROVED ☐ DISAPPROVED Date: 12-11-08 Time: 12:45

Mary Stamy
Inspector's Signature

Connie Wise
Owner/Authorized Agent's Signature

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