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: 35.92975 **W:** 81.52860

LICENSE #: 10864
TYPE FACILITY: Animal Shelter (Private/Public) ☐ **Boarding Kennel** ☒ **Pet Shop** ☐ **Public Auction** ☐
BUSINESS NAME: PetSense
OWNER: PetSense Inc
ADDRESS: 1009 Blowing Rock Blvd, Suite 150, Lenoir N.C. 28645
TELEPHONE: (828) 754-5811
VMO Hunter
COUNTY Caldwell

Number of Primary Enclosures 9 **Animals Present: Dogs** Ø **Cats** 6

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
- NA 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: 11/24/10 Time: 1:30

Gary Stamey
Inspector's Signature

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

LICENSE #: 18864
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☒ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Petsense
OWNER: Petsense INC
ADDRESS: 1009 Blowing Rock Blvd, Suite 150, Lenior NC 28645
TELEPHONE: (828) 754-5811

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
#19	enclosure where 2 orange tabys were - no water / 2 other enclosures were very low on water.	
#20	All Food must be stored in seal containers / unopened bags cannot be left in storage cabnet.	
*	Pet Partners Network, INC. house Kittens + Cats at this location; Volunteers feed, clean water, etc 2 times Daily. On 11/24/10 at 1:30 no volunteers have been here to clean.	
	Vaccination Certificate that are being used needs to have owners name + Contact Info on it, whether it be Pet Partners, or if in foster who is foster/w Contact Info.	
	Management of PetSense took care of water + food during Inspection.	

☒ APPROVED ☐ CONDITIONALLY APPROVED ☐ DISAPPROVED Date: 11/24/10 Time: 1:30

Inspector's Signature

Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

White= Office Canary= Inspector Pink= Owner