Type of Inspection
New ☐ _____
Annual ☐ _____
Follow-Up _____
(Prev. Inspection Date)
Complaint ☐ _____
Courtesy ☐ _____
Random ☒ _____

CDA&CS, VETERINARY DIVISIC
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: 35.66033 **W:** 81.23241

LICENSE #: 70
TYPE FACILITY: Animal Shelter (Private/Public) ☐ **Boarding Kennel** ☐ **Pet Shop** ☐ **Public Auction** ☐
BUSINESS NAME: Catawba Co. Animal Shelter
OWNER: Catawba Co Jay Blatche (Manager)
ADDRESS: 100c SW Blvd P.O. Box 369 Newton N.C.
TELEPHONE: (828) 466-8229
VMO Hunter
COUNTY Catawba

Number of Primary Enclosures 78 **Animals Present: Dogs** 181 **Cats** 67

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
- ☒ 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: 10-13 Time: 1:30

Inspector's Signature **Owner/Authorized Agent's Signature**

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

Animal Welfare Section
NC Department of Agriculture and Consumer Services
1030 Mail Service Center
Raleigh, NC 27699-1030
phone: (919) 715-7111 FAX: (919) 733-6431
e-mail: agr.aws@ncagr.gov URL: www.ncaws.com

Animal Welfare Section, NCDA&CS
Euthanasia Inspection Report

Name of business: Catawba Co. Animal Shelter

City: Newton N.C. License number (if currently licensed): 70 license type: 44

Duties of a CET

Prepare animals for euthanasia .0418: Adequate	Properly record all data .0418: Adequate	Security, controlled substances .0418: Adequate
Supervise Prob. CET .0418: Not Applicabe	Properly euthanize .0418: Adequate	Properly dispose of dead .0418: Adequate

Euthanasia by Injection

IC only on anesth. or sedated .0501: Adequate

Euthanasia by CO

Use only bottled gas .0601:	Use only comm. mfd chamber .0601:	Only same species in chamber .0601:	In chamber for >= 20 min. .0601:
Not used on < 16 weeks .0602:	Not used on pregnant .0602: NA	Not used on near death .0602:	No live with dead .0603:
Animals separated .0604:	At least 1 viewport .0605:	Chamber in good order .0605:	Airtight seals present .0605:
Light shatterproof .0605: NA	Chamber sufficiently lit .0605:	Electrical explosion-proof .0605: NA	If inside, two CO monitors .0605:

Records of monthly inspection .0606:	Records of yearly inspection .0606: NA	Visual inspection by AWS:
Chamber cleaned b/t uses .0607:	Operational guide & or manual .0608:	>= 2 adults present when used .0609:

Extraordinary methods

Reports of extraordinary euth. .0705:

Policy and procedure manual

Current copy of AWA in manual .0803: Adequate	Current AVMA euth. in manual .0803: Adequate	Current HSUS euth. in manual .0803: Adequate	Current AHA euth. in manual .0803: Adequate
List of approved euth. methods .0803: Adequate	List of CETs & methods .0803: Adequate	Contact info for DVM in PVC .0803: Adequate	Contact info for DVM care . 0803: Adequate
List after hour euth. meth. 0803: Adequate	Euth. methods if no CET present 0803: Adequate	Policy for verifying death . 0803: Adequate	Contact info for suppliers. 0803: Adequate
DEA certificate . 0803: Adequate	MSDS sheets, chemical or gas . 0803: not Applicabe	MSDS sheets, tranq. or anesth. . 0803: Adequate	Signs & symptoms, human . 0803: Adequate
First aid information . 0803: Adequate	MD contact information . 0803: Adequate		

Signature of inspector: Gary Stamy date: 10-13-09 page 2 of 3 Signature of management:

NCDA&CS, VETERINARY DIVISI
ANIMAL WELFARE SECTION,
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RALEIGH, NC 27699-1030
PHONE: 919/715-7111, FAX: 919/733-6431

ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: 70
TYPE FACILITY: Animal Shelter (Private/Public) X Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Catawba Co. Animal Shelter
OWNER: Catawba Co.
ADDRESS: 100C SW BLVD. P.O BOX 389 Newton N.C.
TELEPHONE: (828) 446-8229

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
	Euthanasia Report- 8 cats performed euthanasia on 8 dogs and 8 cats on 10/13/09. All euth was performed in a very clean environment. All cats were very profess. and smooth in their duties. All drugs were secure and All drugs were accounted for on all animals. IV was used on all dogs with 3 needing IC to follow, all cats were done IP and put into pet taxis. All animals were disposed of properly after Euthanasia.	
	Well organized and very knowlagble staff.	
	All other facility operations were in good order as seen from last inspection on 10/8/09	

X APPROVED ☐ CONDITIONALLY APPROVED ☐ DISAPPROVED Date: 10-13 Time: 1:30

Mary Stamey
Inspector's Signature

Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

White= Office Canary= Inspector Pink= Owner