Type of Inspection
New ☐ _____
Annual ☐ _____
Follow-Up 7-22-08
(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 8-29-08

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 34.33421 **W:** 78.72188

LICENSE #: 2
TYPE FACILITY: Animal Shelter (Private/Public) ☒ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Columbus Co. Animal Shelter
OWNER: Columbus Co. Gov.
ADDRESS: 288 Leigon Dr., Whiteville, NC 28472
TELEPHONE: (910) 841-3945
VMO Sholar
COUNTY Columbus

Number of Primary Enclosures 45 **Animals Present: Dogs** 13 **Cats** 13

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 N/A
☒ 23. Animals' Appearance

SPECIAL ITEMS

Records
☒ 24. Description of Animals
☒ 25. Records/Vet Treatment
☒ 26. Origin/Disposition
☐ 27. Signature (boarding kennel) N/A
☐ 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: 8-25-08 Time: 4:00 pm

Pat M. Sholar
Inspector's Signature

Barry G. Johnson
Owner/Authorized Agent's Signature

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

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ANIMAL WELFARE SECTION,
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PHONE: 919/715-7111, FAX: 919/733-6431

ENTERED 8-29-08

ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: 2
TYPE FACILITY: Animal Shelter (Private/Public) ☒ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Columbus Co. A.S.
OWNER:
ADDRESS:
TELEPHONE: (_____)_____-_____ Cont.

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
	Follow-up from 7-22-08	
	Items that have been addressed:	
	1- Cat Enclosures - a new cleaning product has been tried on the old cat cages and they look better and cleaner. The galvanised cages do not clean up as well as the stainless steel ones do. Need to continue working on the galvanised cages if continue to use them.	
	2- Today there was no visible illness in the dogs or cats. One very thin dog was in isolation and being fed small amounts over the day.	
	3- Surrender signature was on records today.	
	4- Origin/Disposition details are better today.	
	Items still to be addressed:	
	8) Space - Cat Enclosures need an elevated resting surface (Each cat 6 mos. old or older must be provided a minimum of 4 square feet of floor space - this may include an elevated surface such as a non-wood step stool or upside down litter pan).	
	Temperature was 72° at 2:30 pm. Only 1 shelter person was attending the shelter today. Shelter was clean. Food and litter pans had not been cleaned at inspection time.	
	Inspection is Conditionally Approved contingent upon setting elevated resting surfaces for cat cages or limiting the number of cats per enclosure.	
	Re-Inspect in 30 days.	

☐ APPROVED ☒ CONDITIONALLY APPROVED ☐ DISAPPROVED Date: 8-25-08 Time: 4:00 pm

Pat M. Shelar
Inspector's Signature

Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

White= Office Canary= Inspector Pink= Owner