**Type of Inspection**
New ☐ _____
Annual ☒ 2010
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 9-23-09

# ANIMAL WELFARE INSPECTION

**GPS Coordinates - N:** 34.87647 **W:** 76.90187

**LICENSE #:** 91
**TYPE FACILITY:** Animal Shelter (Private/Public) ☒ **Boarding Kennel** ☐ **Pet Shop** ☐ **Public Auction** ☐
**BUSINESS NAME:** Havelock Animal Services
**OWNER:** Town of Havelock
**ADDRESS:** #2 Governmental ~~Ave.~~ Dr., Havelock, NC 28532
**TELEPHONE:** (252) 444 - 2410
**VMO** Sholar
**COUNTY** Craven

**Number of Primary Enclosures** 4 **Animals Present: Dogs** 4 **Cats** 4

**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: 9/22/09 Time: 11:30Am

Pat M. Sholar
**Inspector's Signature**

**Owner/Authorized Agent's Signature**

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

NCDA&CS, VETERINARY DIVISION
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# ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: 91
TYPE FACILITY: Animal Shelter (Private/Public) ☒ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Havelock Animal Services
OWNER:
ADDRESS: 2 Governmental Dr.
TELEPHONE: (_____) _____-_____

Cont.

| Item Number | Explanation of Inadequacy (circled items above) And Recommendation For Compliance | Date Corrections Must Be Completed |
|---|---|---|
| | 1) Plywood barrier wall which separates the public from the dogs needs to be painted (Sealed) to prevent moisture absorption from the kennel and floor cleaning. Wood is an absorbable material that needs to be sealed when in an area that is subject to being wet. | |
| | 7) Kennel #3 - Hinges need attention - to be re-set in a solid portion of the wall or repaired in such a manner so as to remain secure. All Kennels - there is a space at the bottom of each door large enough for puppies or small dogs to either escape or get caught, need to look at hanging doors so there is no way to have either of these potential problems. All Kennels - when the chain link is repaired the repair wire needs to be applied in a manner that does not leave it turned up for a dog to injury itself - example is to tear a foot pad. Cat Cages with wire bottoms - provide a solid resting surface such as an empty litter pan or folded newspaper or towel. | |
| | Remember to keep any areas in the exercise yard that have bare dirt covered in 6 inches of gravel or concrete - no bare dirt. | |
| | Records have been reviewed and are in order. | |
| | No sign of illness or injury noted. | |
| | No euthanasia inspection was performed today. At this time all dogs + cats to be euthanized are taken to the Craven-Pamlico Shelter. Havelock AC is currently working toward performing EBI at their facility. | |
| | Conditionally Approved contingent upon addressing the above items. Re-Inspect in 30 working days. | |

☐ APPROVED ☒ CONDITIONALLY APPROVED ☐ DISAPPROVED Date: 9/22/09 Time: 11:30Am

Patrn. Shelar
Inspector's Signature

Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

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