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: 35.075170 **W:** 76.963155

LICENSE #: 104
TYPE FACILITY: Animal Shelter (Private/Public) ☒ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Frans Feline
OWNER: Fred Arbit
ADDRESS: 6106 Felucca CT New Bern NC 28560
TELEPHONE: (252) 638-8315
VMO Hunter
COUNTY Craven

Number of Primary Enclosures 3-Rooms 2-Shelter 1-Isolation **Animals Present: Dogs** 0 **Cats** 86 (Shelter)

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
N/A 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
N/A 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: 5/5/09 Time: 10:50 a.m.

J. E. Rogers
Inspector's Signature

M. Arbit
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 #: 104
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Fran's Feline
OWNER: Fran Arbit
ADDRESS: 6106 Felucca CT New Bern NC 28560
TELEPHONE: (252) 638-8315

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
	I perFormed A Follow-up inspection on Todays date. On The last inspection in Sept 2008, I gave the shelter A Conditionally Approval. There were some issues that still needed Addressing. Those issues have NOT been addressed. Some of the electric sockets still need covers. There still needs to be more resting surFaces.	
	On my inspection Today there were cats with discharge around the eyes and cats were sneezing. I inquire about some of the health records on the cats and there was no documentation of the records. This Needs To be corrected with-in 45 days. When I return I want all sick cats with-in the shelter To have treatment sheets. The owner needs to establish a better record keeping system. The shelter does have records indicating "Description of Animals" and origin.	
	While perForming my inspection A cat jumped on me and scratched my back. The cat named "Wiggles" which is a personally owned by Mrs. Arbit is NOT current on the rabies vaccination. However it was NOT due. The vaccination expired in Feb 2009.	
	There are other issues that need To be addressed. The material utilized around the door Frames need replacing. The molding is a Form of plastic material however the cats have scratched holes in the material. This Needs correcting in 45 days. I also Found A Chair made OF wood that needs To be removed in one OF The shelter room.	
	I observed in the isolation Food and water bowls on the Floor. There should NOT be cats walking around in the isolation room. Need To place A sign on the door indicating "Isolation"	
	I did detect Ordor with-in the shelter rooms. The owner was in the process of clean ing however there were bags of old Feces that should be removed After Cleaning.	

☐ APPROVED ☐ CONDITIONALLY APPROVED ☒ DISAPPROVED Date: 5/5/09 Time: 10:45 am

J. E. Elgin
Inspector's Signature

M. Arbit
Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

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ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: 104
TYPE FACILITY: Animal Shelter (Private) Public) ☐ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Fran's Feline
OWNER: Fran Arbit
ADDRESS: 6106 Felucca CT New Bern NC 28560
TELEPHONE: (252) 638-8215

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
	It should be noted that Mrs. Arbit places her cats in local pet stores for adoption. It was brought to my attention that a cat in one of the pet stores had a sneezing episode and Mrs. Arbit had to remove the cat. I was shown that cat and it appeared healthy. However this cat was not seen by a veterinarian. If Mrs. Arbit is going to place cats up for adoption each cat has to have vet treatment sheets if the cat is treated at all times while at the pet stores.	
	I am disapproving this facility today. I will return in 45 days for a re-inspection. These issues need to be corrected.	

☐ APPROVED ☐ CONDITIONALLY APPROVED ☒ DISAPPROVED Date: 5/5/09 Time: 10:50

J. E. B. Jr.
Inspector's Signature

M. Arbit
Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

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