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

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 35.061997 **W:** 79.016997

LICENSE #: 10732
TYPE FACILITY: Animal Shelter (Private/Public) ☐ **Boarding Kennel** ☒ **Pet Shop** ☐ **Public Auction** ☐
BUSINESS NAME: Urban Dog Outsitters
OWNER: Jeanette Baldwin
ADDRESS: 7051-A Cliffdale Rd., Fayetteville, NC 28314
TELEPHONE: (910) 822-3647
VMO Sholar
COUNTY Cumberland

Number of Primary Enclosures 25 **Animals Present: Dogs** 4 **Cats** 1

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 N/A
☐ 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
☒ 27. Signature (boarding kennel)
☒ 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 11/3/09 Time: 11:45 Am

Pam. Sholar
Inspector's Signature

Jeanette Baldwin
Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

White= Office Canary= Inspector Pink= Owner

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

ENTERED

ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: 10732
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☒ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Urban Dog Outsitters
OWNER:
ADDRESS:
TELEPHONE: (_____)_____-_____

Cont.

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
	Sanitation – At 11:45 Am Facility was found in a very unacceptable sanitation state.	
11)	Waste Disposal – Feces (old) was found in the play yard, Kennels and indoor play room.	
12)	Odors were strong from the feces and urine.	
13)	Floors were dirty from the feces and urine.	
14)	Runs were not cleaned today and showed evidence of not being cleaned in more than 1 day.	
15)	Dirty unused food and water bowls were found.	
18)	Indoor + outdoor exercise areas were dirty with feces.	
19)	Dogs and cat needed water.	
21)	Owner's son was supposed to be responsible for the cleaning of the facility and care of the dogs and cat – strong evidence to prove he is incapable of performing these tasks.	
	Recommend to the owner to close the business if she cannot get capable personnel to attend to the required duties.	
	Re-Inspect in 24 hours.	

☐ APPROVED ☐ CONDITIONALLY APPROVED ☒ DISAPPROVED Date: 11/3/09 Time: 11:45 Am

R.M. Stiles
Inspector's Signature

Jarrod Baldwin
Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

White= Office Canary= Inspector Pink= Owner

Type of Inspection
New ☐ _____
Annual ☐ _____
Follow-Up 11/3/09
(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: 35.06197 **W:** 79.01697

LICENSE #: 10732
TYPE FACILITY: Animal Shelter (Private/Public) ☐ **Boarding Kennel** ☒ **Pet Shop** ☐ **Public Auction** ☐
BUSINESS NAME: Urban Dog Outsitters
OWNER: Jeanette Baldwin
ADDRESS: 7051-A Cliffdale Rd., Fayetteville, NC 28314
TELEPHONE: (910) 822-3647
VMO Sholar
COUNTY Cumberland

Number of Primary Enclosures 25 **Animals Present: Dogs** 4 **Cats** 1

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
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☒ 18. Building & Grounds

HUSBANDRY
☒ 19. Adequate Feed/Water
☒ 20. Food Storage
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Records
☒ 24. Description of Animals
☒ 25. Records/Vet Treatment
N/A ☐ 26. Origin/Disposition
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☒ 29. Care in Transit Discussed

Veterinary Care
☒ 30. Isolation Facility
☒ 31. No Signs of Illness/ Treated

☒ **APPROVED** ☐ **CONDITIONALLY APPROVED** ☐ **DISAPPROVED** Date 11/4/09 Time: 11:45Am

Robin Sholar
Inspector's Signature

Jeanette Baldwin
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 #: 10732
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☒ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Urban Dog Outsitters
OWNER:
ADDRESS: Cont.
TELEPHONE: (_____) _____-_____

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
	Follow-up from 11/3/09 on Sanitation issues - 24 hours. There are no sanitation issues today. Today all areas of the Kennel are clean. The owner's son is still taking care of Kennel but has cleaned all the Kennels and exercise areas - indoor + outdoor. The dogs and cat had water today and their appearance was good. Discussed sanitation practices with the son and advised him on the importance of maintaining a clean environment. A random inspection will follow at a later date to determine if good sanitation practices are being performed.	

☒ APPROVED ☐ CONDITIONALLY APPROVED ☐ DISAPPROVED Date: 11/4/09 Time: 11:45AM

Inspector's Signature

Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

White= Office Canary= Inspector Pink= Owner