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 12-4-08

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 35.01082 **W:** 78.95107

LICENSE #: 10480
TYPE FACILITY: Animal Shelter (Private/Public) ☐ **Boarding Kennel** ☒ **Pet Shop** ☐ **Public Auction** ☐
BUSINESS NAME: Paw Prints Inn
OWNER: Barbara A. Sherrill
ADDRESS: 4214 Cumberland Rd., Fayetteville, NC 28306
TELEPHONE: (910) 429 - 1334
VMO Sholar
COUNTY Cumberland

Number of Primary Enclosures 30 **Animals Present: Dogs** 4 **Cats** 0

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
N/A ☐ 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 12.2.08 TMB Time: 10:00AM

Robert M. Sholar
Inspector's Signature

Heather Jopson
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,
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ENTERED 12-4-08

ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: 10480
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☒ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Paw Prints Inn
OWNER:
ADDRESS:
TELEPHONE: (_____)_____-_____

Cont.

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
	Comments:	
	1 set of lights need to have bulbs replaced.	
	Owner has added a separate small dog room. It meets all the AW requirements.	
	Owner needs to continue to pay attention to keeping the tiles in the runs well maintained.	
	Cleaning was on going at time of inspection.	
	All records are in order. Kennel temperature is within range (50°-85°).	

☒ APPROVED ☐ CONDITIONALLY APPROVED ☐ DISAPPROVED Date: 12-2-08 Time: 10:00am

Robin Shelton
Inspector's Signature

Heather J. Mobley
Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

White= Office Canary= Inspector Pink= Owner