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 9-24-08

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 35.07648 **W:** 78.93342

LICENSE #: 27
TYPE FACILITY: Animal Shelter (Private/Public) ☒ **Boarding Kennel** ☐ **Pet Shop** ☐ **Public Auction** ☐
BUSINESS NAME: SPCA of Cumberland County
OWNER: Martha Haar
ADDRESS: 3232 Bragg Blvd., Fayetteville, NC 28308
TELEPHONE: (910) 860-1177
VMO Sholar
COUNTY Cumberland

Number of Primary Enclosures 67 **Animals Present: Dogs** 6 **Cats** 42

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: 9-22-08 Time: 2:15pm

Pam Sholar
Inspector's Signature

Martha E. Haar
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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PHONE: 919/715-7111, FAX: 919/733-6431

ENTERED 9-24-08

ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: 27
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: SPCA of Cumberland County
OWNER:
ADDRESS:
TELEPHONE: (_____)_____-_____

Cont.

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
7)	Resting Boards in cat cages - All damaged formica covering must be replaced - discussed changing boards to a polyboard material.	
25)	20 cats have expired Rabies shots. Owner has an appointment with Dr. Garrett on 9-29-08 to update these vaccines.	

Comments:

Outdoor exercise yards - owner has maintained good grass in the large yard and is continuing to work on the small yard - suggested sowing winter rye grass to maintain a good grassed yard in the winter months.

There was no visible signs of illness noted today. Owner was working alone today and daily cleaning not completed at inspection but there were no kennel odors - shows regular cleaning is performed.

Conditionally Approved contingent upon addressing the above items.

Re-Inspect in 30 days.

☐ APPROVED ☒ CONDITIONALLY APPROVED ☐ DISAPPROVED Date: 9-22-08 Time: 2:15 pm

Pat M. Shelter
Inspector's Signature

Marilyn E Haar
Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

White= Office Canary= Inspector Pink= Owner