Type of Inspection
New ☒ _____
Annual ☐ _____
Follow-Up _____
(Prev. Inspection Date)
Complaint ☐ _____
Courtesy ☐ _____
Random ☐ _____

DA&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 ☐

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 36.48972 **W:** 76.05775

LICENSE #: _____
TYPE FACILITY: Animal Shelter (Private/Public) ☐ **Boarding Kennel** ☒ **Pet Shop** ☐ **Public Auction** ☐
BUSINESS NAME: The Barking Barn
OWNER: Debbi Torres
ADDRESS: 137 S. Ky Haven Rd Moyock NC
TELEPHONE: (252) 232-3065
VMO Hunter
COUNTY Currituck

Number of Primary Enclosures 9 **Animals Present: Dogs** 1 **Cats** ∅

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
- ☒ 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: 6/8/10 Time: 10:00 AM

J. E. [illegible]
Inspector's Signature

Debbi Torres
Owner/Authorized Agent's Signature

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

CDA&CS, VETERINARY DIVISIO
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ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: _____
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☒ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: The Barking Barn
OWNER: _____
ADDRESS: _____
TELEPHONE: (_____)_____-_____

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
	This is a new facility inspection. The following needs to be corrected before a license is issued.	
	#1 #4 - The outside area were the dogs play the wood needs to be covered.	
	#7 The primary enclosure walls need to be covered. The owner is going to install FRP board.	
	#18 The common area ground needs to be covered. The bushes on the outside need to be trimmed back. The wood fence in the common needs to be covered. The fence in the small dog common area needs to be 5'.	
	#25, #27 #28 I discussed with the owner what is required under the rules pertaining to record keeping.	
	This facility has been operating for 12 years. The owner was not aware she had to be licensed.	
	I will return to perform a follow-up with-in 45 days.	

☐ APPROVED ☐ ~~CONDITIONALLY APPROVED~~ ☒ DISAPPROVED Date: 6/8/10 Time: 10:00

J.E. [signature]
Inspector's Signature

Debbie Tapney
Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

White= Office Canary= Inspector Pink= Owner