Type of Inspection
New ☐ _____
Annual ☐ _____
Follow-Up EUTH #3
(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: 35.46238 **W:** 80.14681

LICENSE #: 33
TYPE FACILITY: Animal Shelter (Private/Public) ☒ **Boarding Kennel** ☐ **Pet Shop** ☐ **Public Auction** ☐
BUSINESS NAME: DAVIDSON CO ANIMAL SHELTER
OWNER: DAVIDSON CO
ADDRESS: 490 GLENDALE RD LEXINGTON
TELEPHONE: (336) 357-0805
VMO HUNTER
COUNTY DAVIDSON

Number of Primary Enclosures 108 **Animals Present: Dogs** 56 **Cats** 29

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. ~~AR~~ 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. ~~NA~~ Signature (boarding kennel)
☐ 28. ~~NA~~ 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: 1/6/10 Time: 0836

Inspector's Signature **Owner/Authorized Agent's Signature**

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

Animal Welfare Section
NC Department of Agriculture and Consumer Services
1030 Mail Service Center
Raleigh, NC 27699-1030
phone: (919) 715-7111 FAX: (919) 733-6431
e-mail: agr.aws@ncagr.gov URL: www.ncaws.com

Animal Welfare Section, NCDA&CS
Euthanasia Inspection Report

Name of business: Davidson Co Animal Shelter

City: Lexington | License number (if currently licensed): 33 | license type: Shelter

Duties of a CET

Prepare animals for euthanasia .0418: Acceptable	Properly record all data .0418: Acceptable	Security, controlled substances .0418: Acceptable
Supervise Prob. CET .0418: Acceptable	Properly euthanize .0418: Acceptable	Properly dispose of dead .0418: Acceptable

Euthanasia by Injection

IC only on anesth. or sedated .0501: Not viewed

Euthanasia by CO

Use only bottled gas .0601: Acceptable	Use only comm. mfd chamber .0601: Acceptable	Only same species in chamber .0601: Acceptable	In chamber for >= 20 min. .0601: Acceptable
Not used on < 16 weeks .0602: Acceptable	Not used on pregnant .0602: Acceptable	Not used on near death .0602: Acceptable	No live with dead .0603: Acceptable
Animals separated .0604: Acceptable	At least 1 viewport .0605: Acceptable	Chamber in good order .0605: Acceptable	Airtight seals present .0605: Acceptable
Light shatterproof .0605: Acceptable	Chamber sufficiently lit .0605: Acceptable	Electrical explosion-proof .0605: Acceptable	If inside, two CO monitors .0605: Acceptable
Records of monthly inspection .0606: Acceptable	Records of yearly inspection .0606: Acceptable	Visual inspection by AWS: Acceptable	
Chamber cleaned b/t uses .0607: Acceptable	Operational guide & or manual .0608: Acceptable	>= 2 adults present when used .0609: Acceptable	

Extraordinary methods

Reports of extraordinary euth. .0705: Acceptable

Policy and procedure manual

Current copy of AWA in manual .0803: Acceptable	Current AVMA euth. in manual .0803: Acceptable	Current HSUS euth. in manual .0803: Acceptable	Current AHA euth. in manual .0803: Acceptable
List of approved euth. methods .0803: Acceptable	List of CETs & methods .0803: Acceptable	Contact info for DVM in PVC .0803: Acceptable	Contact info for DVM care . 0803: Acceptable
List after hour euth. meth. 0803: Acceptable	Euth. methods if no CET present 0803: Acceptable	Policy for verifying death . 0803: Acceptable	Contact info for suppliers. 0803: Acceptable
DEA certificate . 0803: Acceptable	MSDS sheets, chemical or gas . 0803: Acceptable	MSDS sheets, tranq. or anesth. . 0803: Acceptable	Signs & symptoms, human . 0803: Acceptable
First aid information . 0803: Acceptable	MD contact information . 0803: Acceptable		

Signature of inspector: [illegible] | date: 1/6/10 | page 2 of 2 | Signature of management: Anita S Wood