Type of Inspection
New ☐
Annual ☐
Follow-Up 7/7/08
(Prev. Inspection Date)
Complaint ☐
Courtesy ☐
Random ☐

NCDA&CS, VETERINARY DIVISION
1030 MAIL SERVICE CENTER, RALEIGH, NC 27699-1030
PHONE: 919/733-7601, FAX: 919/733-2277

INDOOR ☒
OUTDOOR ☐
BOTH ☐

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 35.87963 W: 80.55114
QBSP Number – ☐☐ - ☐☐☐ - ☐☐ - ☐☐ - ☐

BUSINESS NAME: HUMANE SOCIETY OF DAVIE LICENSE #: 97
OWNER: RACHEL DUNN COORDINATOR
ADDRESS: 590 EATON RD
TELEPHONE: (336) 751-5214 VMO HUNTER COUNTY DAVIE
TYPE FACILITY: Animal Shelter ☒ Boarding Kennel ☐ Dealer ☐ Pet Shop ☐ Public Auction ☐
Number of Primary Enclosures 64 Animals Present: Dogs _____ Cats _____

Inspector: Mark "X" in box, if adequate. Circle 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. Animals' Appearance

SPECIAL ITEMS

Records
- ☒ 23. Description of Animals
- ☒ 24. Records/Vet Treatment
- ☒ 25. Origin/Disposition
- ☐ 26. ~~N/A~~ Signature (boarding kennel) N/A

Transportation
- ☒ 27. Care in Transit Discussed

Veterinary Care
- ☒ 28. Isolation Facility
- ☒ 29. No Signs of Illness/ Treated

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
	- PLAYROOM HAS HAD PLEXI-GLASS BOARD INSTALLED COVERING DRYWAL	
	- FLOORING IS BEING SHOULD BE COMPLETED BY 8/15	
	- STORAGE AREAS GREATLY IMPROVED	
	- COMMON AREAS ARE CLEAN	
	- GRASS HAS BEEN PLANTED IN COMMON AREA	
	- TIME HAS BEEN ADDED TO TX SHEETS	
20	STORE OPEN BAGS OF FOOD IN SEALED CONTAINERS!	8/15/08

☒ APPROVED (Conditionally) ☐ DISAPPROVED Date: 8/6/08 Time: 15:36

Veterinarian: _____ Telephone: (____) _____-_____

Shelley Swain
Inspector's Signature

Rachel A Dunn
Owner/Authorized Agent's Signature

AW-2
Rev. 2/05 White= Office Canary= Inspector Pink= Owner