Type of Inspection
New □ _____
Annual □ _____
Follow-Up 9-11-07
(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 X
OUTDOOR □
BOTH □

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 34.95129 **W:** 77.97481

LICENSE #: 41
TYPE FACILITY: Animal Shelter (Private/Public) X **Boarding Kennel** □ **Pet Shop** □ **Public Auction** □
BUSINESS NAME: Duplin Co. Animal Shelter
OWNER: Duplin Co. Gov.
ADDRESS: 117 Middleton Cemetery, Kenansville, NC 28349
TELEPHONE: (910) 296-2159
VMO Sholar
COUNTY Duplin

Number of Primary Enclosures 20 Dog 36 CAT **Animals Present: Dogs** 29 **Cats** 6

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.
X 3. Lighting
X 4. Ceiling, Wall, Floors
X 5. Storage
X 6. Water Drainage

Primary Enclosures
□ 7. Structure & Repair
X 8. Space
□ 9. Ventilation & Temp.
X 10. Adequate Shelter

SANITATION

X 11. Waste Disposal
X 12. Odor
X 13. Ceiling, Wall, Floors
X 14. Primary Enclosures
X 15. Equipment & Supplies
X 16. Washrooms, Sinks, Basins
X 17. Insect/Vermin Control
X 18. Building & Grounds

HUSBANDRY
X 19. Adequate Feed/Water
X 20. Food Storage
X 21. Personnel
X 22. Ratio of 1:10 personnel to animals if >4 in primary enclosure or common area
□ 23. Animals' Appearance

SPECIAL ITEMS

Records
X 23. Description of Animals
X 24. Records/Vet Treatment
X 25. Origin/Disposition
□ 26. Signature (boarding kennel) N/A
□ 27. Written permission from owner for commingling (doggie daycare)

Transportation
X 28. Care in Transit Discussed

Veterinary Care
□ 28. Isolation Facility
X 29. No Signs of Illness/ Treated

□ **APPROVED** X **DISAPPROVED** Date: 11-20-07 Time: 11:45 Am

Robin Sholar
Inspector's Signature

Julie Warren
Owner/Authorized Agent's Signature

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

NCDA&CS, VETERINARY DIVISION
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ANIMAL WELFARE INSPECTION CONTINUTATION PAGE

LICENSE #: 41
TYPE FACILITY: Animal Shelter (Private/Public) ☐ ☒ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Duplin Co. An. Shelter
OWNER:
ADDRESS:
TELEPHONE: (_____)_____-_____

Con't.

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
	Follow-up from 9-11-07.	
	Inadequacies that have addressed since 9-11-07:	
	Resting surfaces are now available in all runs - Good.	
	Inadequacies that have not been addressed at all:	
	1) + 7) Cross Contamination barriers are needed in main Kennel. Kennel Pipes	
	2) + 9) + 28) need attention	
	Temperature + Ventilation issues have not been addressed. Main Kennel area today is 68° at 12:00 - Good - But Cat area does not have any heat - Cages are out of rain + sun but subject to extreme heat + cold temperatures. Quarantine dog area is fully enclosed but has no access to heat in winter or cool in summer. Quarantine is also the isolation area.	
	Comments: The drop box is no longer used. No apparent	
	Sickness noted in dogs or cats today.	
	The above issues either must be addressed OR - a Time frame as to when they will be addressed within The next 30 days 12-20-07.	

☐ APPROVED ☒ DISAPPROVED Date: 11-20-07 Time: 11:45 AM

Pat M. Stiles
Inspector's Signature

Julie Warren
Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

White= Office Canary= Inspector Pink= Owner