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 ☐

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 34.82024 **W:** 78.02882

LICENSE #: 105
TYPE FACILITY: Animal Shelter (Private/Public) ☒ **Boarding Kennel** ☐ **Pet Shop** ☐ **Public Auction** ☐
BUSINESS NAME: Rose Hill Holding Facility
OWNER: Town of Rose Hill
ADDRESS: P.O. Box 9 145 Lakefront Rd, Rose Hill, NC 28458
TELEPHONE: (910) 289 - 2091
VMO Sholar
COUNTY Duplin

Number of Primary Enclosures 4 (1-K-9 Pen 3-Fel.) **Animals Present: Dogs** 0 **Cats** 0

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
None Housed Today ☐ 23. Animals' Appearance

SPECIAL ITEMS

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

Transportation
☒ 28. Care in Transit Discussed

Veterinary Care
☒ 28. Isolation Facility
☐ 29. No Signs of Illness/ Treated
None Housed Today

☐ **APPROVED** ☐ **DISAPPROVED** Date: 1-14-08 Time: 4:00 pm

Pam Sholar
Inspector's Signature

Michael F. O'Connell
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 #: ——
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Rose Hill Holding Facility
OWNER:
ADDRESS:
TELEPHONE: (_____)_____-_____

Cont.

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
	This is a New Licensing Inspection today.	
	All inadequacies have been corrected to obtain compliance w/ NC AW Regs.	
	Remember to Keep Records of Origin + Disposition, vet treatments and a detailed description of dogs + cats.	

☒ APPROVED ☐ DISAPPROVED Date: 1-14-08 Time: 4:00 pm

Pat M. Stiles
Inspector's Signature

Michael F. O'Connell
Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

White= Office Canary= Inspector Pink= Owner