Type of Inspection
New ☐ _____
Annual ☐ _____
Follow-Up 4-17-08
(Prev. Inspection Date)
Complaint ☐ _____
Courtesy ☐ _____
Random ☐ _____

NCDA&CS, VETERINARY DI SION
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: 34.71920 **W:** 77.97940

LICENSE #: 104
TYPE FACILITY: Animal Shelter (Private/Public) ☒ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Town of Wallace
OWNER: Town of Wallace
ADDRESS: P.O. Box 849, Water Treatment Plant Rd., Wallace, NC 28466
TELEPHONE: (910) 285 - 4137/2126
VMO Sholar
COUNTY Duplin

Number of Primary Enclosures 4 **Animals Present: Dogs** 1 **Cats** 2

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 N/A
☒ 23. Animals' Appearance

SPECIAL ITEMS

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

Transportation
☒ 29. Care in Transit Discussed

Veterinary Care
☐ 30. Isolation Facility N/A
☒ 31. No Signs of Illness/ Treated

☒ **APPROVED** ☐ **CONDITIONALLY APPROVED** ☐ **DISAPPROVED** Date: 4-23-08 Time: 4:00pm

[signature] **Inspector's Signature**

B. Maready **Owner/Authorized Agent's Signature**

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

NCDA&CS, VETERINARY DI SION
ANIMAL WELFARE SECTION,
1030 MAIL SERVICE CENTER,
RALEIGH, NC 27699-1030
PHONE: 919/715-7111, FAX: 919/733-6431

ENTERED

ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: 104
TYPE FACILITY: Animal Shelter (Private/Public) ☒ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Town of Wallace
OWNER:
ADDRESS:
TELEPHONE: (_____)_____-_____

Cont

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
	Follow-up from 4-17-08	
	All inadequacies have been addressed.	
	Comments: Food/water receptacles are clean today. Grounds have been cleaned/cleaned of trash. Cats and dog have food/water. Record show more attention to details. Food container is covered today. Chain link is repaired.	
	A storage building has been created out of the old un-used dog pen to store food and traps and supplies.	
	19) 2 sick kittens were housed that were being fed dog food. No cat food was available. Supervisor was informed during inspection and Duplin AC was called to ensure pickup today. Supervisor assured me cat food would be available from now on.	
	Discussed w/ supervisor keeping the storage shed clean and to clean out the feed storage can from all old food. Also discussed concerns about the automatic feed and water receptacles. Many dogs have to be trained to use them.	

☒ **APPROVED** ☐ **CONDITIONALLY APPROVED** ☐ **DISAPPROVED** Date: 4-23-08 Time: 4:00pm

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

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