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: 36.06773 W: 79.46347

LICENSE #: 10030
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☒ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Battleground Rest Inn
OWNER: Kay Jones
ADDRESS: 830 Riley Lewis Rd Greensboro
TELEPHONE: (336) 200-0021
VMO Hunter
COUNTY Guilford

Number of Primary Enclosures 54 Animals Present: Dogs 35 Cats 4

Inspector: Mark "X" in each box, if adequate.
Circle each item number, if inadequate.
Use NA if not applicable

Walls

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
☒ 23. Animals' Appearance

SPECIAL ITEMS

Records
☒ 23. Description of Animals
☐ 24. Records/Vet Treatment
☒ 25. Origin/Disposition
☐ 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

☐ APPROVED ☒ DISAPPROVED Date: March 5, 2010 Time: 0830

Shelley J. Swann
Inspector's Signature

Owner/Authorized Agent's Signature

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

CDA&CS, VETERINARY DIVISI(
ANIMAL WELFARE SECTION,
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ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: 10030
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Battleground Pet Inn
OWNER:
ADDRESS:
TELEPHONE: ( )

This is a preliminary Inspection report

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
	Outside Kennels had not been cleaned from night before. Door was locked and dogs were in stacked crates inside housing facility.	
	Called Ms Jones she was in the house and met me at the housing facility in the back	
	Ms Jones stated to me that the dogs at the facility were either personal animals or rescues that there were no boarding animals	
(13)(15)	Sanitation of housing facility was extremely poor - dirt, junk, clutter and accessories were piled on counters floors and on tops of cages	
(10)	There were no dog houses in outdoor enclosure	
(8)	At least six small dogs were in enclosures that appeared to be too small for the individual including but not limited to a dach. BET 07, & and several poodles	
(23)	Several dogs were extremely matted an apricot poodle was so matted his eyes were not visible and appeared matted shut	
	Dalmation had sores on the tops of both front feet	

☐ APPROVED ☐ CONDITIONALLY APPROVED ☐ DISAPPROVED Date: 3/5/10 Time: 0830

Inspector's Signature

Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

White= Office Canary= Inspector Pink= Owner

NCDA&CS, VETERINARY DIVIS' N
ANIMAL WELFARE SECTION,
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PHONE: 919/715-7111, FAX: 919/733-6431

ANIMAL WELFARE INSPECTION CONTINUATION PAGE

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

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
	Dogs did not have access to water - I watched Ms Jones turn 2 hounds a golden and a mixed breed dog out into the back lot and they immediately began drinking out of mud puddles they did not stop until fresh water was given - then they drank for several minutes from freshly filled receptacle	
23	Golden retriever severely matted covered in mud - very pruritic visible hot spot on lumbar region	
	No records available for inspection	
	There were 29 rabies cert presented of those 16 were current	

☐ APPROVED ☐ CONDITIONALLY APPROVED ☒ DISAPPROVED Date: 3/5/10 Time: 8:30

Shelley J. Swann
Inspector's Signature

Owner/Authorized Agent's Signature

AW-2
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