Type of Inspection
New ☐ _____
Annual ☐ _____
Follow-Up ☒ 5/3/10
(Prev. Inspection Date)
Complaint ☐ _____
Courtesy ☐ _____
Random ☐ _____

DA&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 ☐

ENTERED

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 36.35547 **W:** 77.62201

LICENSE #: 25
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Halifax Co Animal Shelter
OWNER: Halifax Co Government
ADDRESS: 568 Dog Pound Rd Halifax NC 27839
TELEPHONE: (252) 583-1050
VMO Huston
COUNTY Halifax

Number of Primary Enclosures 31-Dog 26-Cat **Animals Present: Dogs** 41 **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
- ☒ 23. Animals' Appearance

SPECIAL ITEMS

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

Transportation
- ☒ 29. Care in Transit Discussed

Veterinary Care
- ☒ 30. Isolation Facility
- ☒ 31. No Signs of Illness/ Treated

☐ **APPROVED** ☐ **CONDITIONALLY APPROVED** ☒ **DISAPPROVED** Date: 8/23/10 Time: 12:35pm

J. E. B.
Inspector's Signature

Robert Richardson
Owner/Authorized Agent's Signature

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

CDA&CS, VETERINARY DIVISION
ANIMAL WELFARE SECTION,
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ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: 25
TYPE FACILITY: Animal Shelter (Private/Public) ☒ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Halifax Co Animal Shelter
OWNER:
ADDRESS:
TELEPHONE: (_____)_____-_____

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
	I performed a follow-up inspection today. I performed an inspection on 5/3/10. I listed some inadequacies on that inspection. Those inadequacies have not been addressed.	
	#7 The resting surfaces in the dog kennels still need repair or replacing. The plastic is coming off the resting surfaces.	
	#7 The chain link on some of the dog kennels need repair.	
	#11 Need to install drain covers in the kennel.	
	#14 Need to seal the kennel floors in the dog enclosures.	
	There are some inadequacies that have been addressed.	
	The air filters w.th-in the shelter have been replaced. The insect and vermin issue has been corrected.	
	I didn't perform a euthanasia inspection today. The manual is complete.	
	I am disapproving this inspection and will return in 45 days.	

☐ APPROVED ☐ CONDITIONALLY APPROVED ☐ DISAPPROVED Date: 8/23/10 Time: 12:35pm

J.C. B[illegible]
Inspector's Signature

Robert Richardson
Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

White= Office Canary= Inspector Pink= Owner