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: 34.912068 **W:** 79.33505

LICENSE #: 96
TYPE FACILITY: Animal Shelter (Private/Public) ☑ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: City of Dunn Animal Control
OWNER: City of Dunn
ADDRESS: 1065 J. W. Edwards Ln. Dunn NC 28724
TELEPHONE: (910) 892-3777
VMO Hunter
COUNTY Harnett

Number of Primary Enclosures 40 **Animals Present: Dogs**_____ **Cats** _____

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: 11-3-10 Time: 2:30pm

E. Garner
Inspector's Signature

N/A
Owner/Authorized Agent's Signature

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

NCDA&CS, VETERINARY DIVISION
ANIMAL WELFARE SECTION,
1030 MAIL SERVICE CENTER,
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ANIMAL WELFARE INSPECTION CONTINUTATION PAGE

LICENSE #: 96
TYPE FACILITY: Animal Shelter (Private (Public)) ☒ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: City of Dunn Animal Control.
OWNER:
ADDRESS:
TELEPHONE: (_____)_____-_____

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
	Last Inspection 4-14-10:	
	* Euthanasia Inspection	
	* No inadequacies.	
	No one available for inspection. Talked with	
	officer they are only available between	
	8am-12pm. M-F.	
	Will return @ a later date.	

☐ **APPROVED** ☐ **DISAPPROVED** Date: 11-3-10 Time: 2:30pm

E. Garner
Inspector's Signature

Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

White= Office Canary= Inspector Pink= Owner