**Type of Inspection**
New ☑ _____
Annual ☐ _____
Follow-Up _____
(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 ☑

# ANIMAL WELFARE INSPECTION

**GPS Coordinates - N:** 35.32607 **W:** 82.45093

**LICENSE #:** _____
**TYPE FACILITY:** Animal Shelter (Private/Public) ☒ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
**BUSINESS NAME:** All Creatures Great and Small
**OWNER:** Carl West President
**ADDRESS:** 1050 7th Ave East Hendersonville 28792
**TELEPHONE:** (828) 216-0693
**VMO** Hunter
**COUNTY** Henderson

**Number of Primary Enclosures** ~~47+3-4~~ 210 **Animals Present: Dogs** 375 **Cats** ~249

**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**
☐ 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: April 24, 2007 Time: 14:49

[signature] **Inspector's Signature**

[signature] **Owner/Authorized Agent's Signature**

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

CDA&CS, VETERINARY DIVISIO
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# ANIMAL WELFARE INSPECTION CONTINUTATION PAGE

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BUSINESS NAME: All Creatures Great and Small
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TELEPHONE: (828) 216-0693

| Item Number | Explanation of Inadequacy (circled items above) And Recommendation For Compliance | Date Corrections Must Be Completed |
|---|---|---|
| (1) | Brick fascia pulling away from building | |
| | Perimeter fencing is damaged and down in several areas | |
| | Electrical outlets exposed and hanging loose | |
| (2) | Ventilation in cat iso area very poor | |
| (3) | Lighting inadequate in several areas including but not limited to inside kennel areas | |
| (4) | Some ceiling areas missing, some in disrepair, insulation exposed & hanging – Drywall missing in many areas throughout facility. | |
| (5) | Numerous storage areas throughout facility jumbled with debris & trash | |
| (6) | Left side of building as you face have untreated waste water piped from toilet & washing machine into large lagoon-like area. | |
| (7) | Chain link fencing in the majority of primary enclosures is in disrepair – exposed dirt & wood in some outdoor enclosures | |
| (8) | Some indoor primary enclosures (wire crates) appear inadequate in size. | |
| (9) | See #2 | |
| (10) | >20 outside primary enclosures have more dogs than dog houses. | |
| (11) | Trash, debri in piles throughout property – Lg # of employees were removing debri and cleaning. | |
| (12) | Odor noted inside & outside of facility | |
| (13) | Evidence of urinary & fecal contamination not of recent origin | |
| (14) | See #13 – Hammocks in cat primary enclosures must be removed and sanitized every seven days | |
| (15) | See #6 Standing water in bathroom proximal to hot $H_2O$ heater – Overall cleanliness lacking | |

☐ APPROVED ☒ DISAPPROVED Date: April 24, 2007 Time: 14:49

Inspector's Signature

R. J. Swan
Owner/Authorized Agent's Signature

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| Item Number | Explanation of Inadequacy (circled items above) And Recommendation For Compliance | Date Corrections Must Be Completed |
|---|---|---|
| 17 | Evidence of rodent infestation including recent burrowing and fresh droppings - | |
| 18 | Overall sanitation of building and grounds poor | |
| 19 | Food and water receptacles chewed & damaged to the point of needing replacement | |
| 23 | Animals noted with hairloss and puritic conditions black & white dog, PBTx, noted with significant lameness. (Cider) | |
| 23 25 | Documentation severely lacking as to descriptions origin & disposition<br>No evidence found of current rabies vaccinations on any of the > 15 records examined at random | |
| 24 | Medical historys not current on most records | |
| 28 | Ceiling is failing in in cat iso #II | |

☐ APPROVED ☒ DISAPPROVED Date: April 24, 2007 Time: 14:49

Inspector's Signature

R. J. Dunn
Owner/Authorized Agent's Signature

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