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

NCDA&CS, VETERINARY DIVISION
1030 MAIL SERVICE CENTER, RALEIGH, NC 27699-1030
PHONE: 919/733-7601, FAX: 919/733-2277

INDOOR ☐
OUTDOOR ☐
BOTH ☐

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 35°.21.162 W: 82°.30.040

QBSP Number – ☐☐ – ☐☐☐ – ☐☐ – ☐☐ – ☐

BUSINESS NAME: HENDERSON ANIMAL SERVICES LICENSE #: _____

OWNER: CONTACT MORGAN WOODWARD

ADDRESS: 828 STONEY MT RD - HENDERSONVILLE

TELEPHONE: (828) 698-6009 VMO _____ COUNTY HENDERSON

TYPE FACILITY: Animal Shelter ☒ Boarding Kennel ☐ Dealer ☐ Pet Shop ☐ Public Auction ☐

Number of Primary Enclosures 84 Animals Present: Dogs 56 Cats 47

Inspector: Mark "X" in box, if adequate. Circle 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. Animals' Appearance

SPECIAL ITEMS

Records

- ☒ 23. Description of Animals
- ☒ N/A 24. Records/Vet Treatment
- ☒ 25. Origin/Disposition
- ☒ N/A 26. Signature (boarding kennel)

Transportation

- ☒ N/A 27. Care in Transit Discussed

Veterinary Care

- ☒ 28. Isolation Facility
- ☒ N/A 29. No Signs of Illness/ Treated

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
18)	LANDSCAPING NOT COMPLETE	
21)	AT PRESENT ACO'S DOUBLE AS KENNEL ATTENDANTS AND EUTHANASIA TECHS — UNDERSTAFFED IN KENNEL	
EBI	ONLY FORM OF EUTHANASIA	

☐ APPROVED ☐ DISAPPROVED Date: 6/29/06 Time: 10:00

Veterinarian: _____ Telephone: ( ) _____ - _____

Shelley J. Swaim
Inspector's Signature

Owner/Authorized Agent's Signature

AW-2
Rev. 2/05

White= Office Canary= Inspector Pink= Owner