**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:** ☐☐.☐☐☐☐☐ **W:** ☐☐.☐☐☐☐☐

**LICENSE #:** 10438
**TYPE FACILITY: Animal Shelter (Private/Public)** □ **Boarding Kennel** ☒ **Pet Shop** □ **Public Auction** □
**BUSINESS NAME:** Custom Dog Training
**OWNER:** Shana White
**ADDRESS:** 1892 Old Mocksville Road Statesville NC
**TELEPHONE:** (704) 878 - 9382
**VMO** Merritt
**COUNTY** Iredell

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

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

Take off list

**STRUCTURE**

Take off list They are moving

**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

Take off list

□ **APPROVED** □ **CONDITIONALLY APPROVED** □ **DISAPPROVED** Date: 4/10/08 Time: _____

[signature]
**Inspector's Signature**

**Owner/Authorized Agent's Signature**

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

NCDA&CS, VETERINARY DIVISION
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# ANIMAL WELFARE INSPECTION CONTINUATION PAGE

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**TELEPHONE:** (704) 878-9382

| Item Number | Explanation of Inadequacy (circled items above) And Recommendation For Compliance | Date Corrections Must Be Completed |
|---|---|---|
| | Shana called me and said she will not be boarding any more dogs So take her off the list. She will be moving, selling her house & kennel | |

☐ APPROVED ☐ CONDITIONALLY APPROVED ☐ DISAPPROVED Date: 4/10/15 Time:

Inspector's Signature

Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

White= Office Canary= Inspector Pink= Owner