**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** ☐

ENTERED

# ANIMAL WELFARE INSPECTION

**GPS Coordinates - N:** ☐☐.☐☐☐☐☐ **W:** ☐☐.☐☐☐☐☐

**LICENSE #:** 10265
**TYPE FACILITY: Animal Shelter (Private/Public)** ☐ **Boarding Kennel** ☒ **Pet Shop** ☐ **Public Auction** ☐
**BUSINESS NAME:** Noah's Ark Boarding
**OWNER:** Debbie S Lundy
**ADDRESS:** 321 old Mocksville Road statesville NC
**TELEPHONE:** (704) 873-7290
**VMO** Merritt
**COUNTY** Iredell

**Number of Primary Enclosures** 27 **Animals Present: Dogs** 5 **Cats** 0

**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: 10/7/08 MB Time: 9:30 AM

**Inspector's Signature** **Owner/Authorized Agent's Signature**

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

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ANIMAL WELFARE SECTION,
1030 MAIL SERVICE CENTER,
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ENTERED

# ANIMAL WELFARE INSPECTION CONTINUATION PAGE

**LICENSE #:** 10265
**TYPE FACILITY:** Animal Shelter (Private/Public) ☐ Boarding Kennel ☒ Pet Shop ☐ Public Auction ☐
**BUSINESS NAME:** Noah's Ark Boarding
**OWNER:** Debbie S. Lundy
**ADDRESS:** 321 Old Mocksville Road Statesville NC
**TELEPHONE:** (704) 873 - 7290

| Item Number | Explanation of Inadequacy (circled items above) And Recommendation For Compliance | Date Corrections Must Be Completed |
|---|---|---|
| | Keep food in sealed containers | |
| | Caulk & seal all cracks in concrete in contact with animals | |
| | Still need to add 6" of rock over bare dirt in play area. | |
| | Make sure you keep train trough clean. | |
| | All records are in order, smells great and is clean on the | |
| | inside. good job. | |

☒ APPROVED ☐ CONDITIONALLY APPROVED ☐ DISAPPROVED Date: 10/3/08 Time: 9:30 Am

Inspector's Signature

Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

White= Office Canary= Inspector Pink= Owner