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: 35.565513 **W:** 81.173411

ENTERED

LICENSE #: 10728
TYPE FACILITY: Animal Shelter (Private/Public) ☐ **Boarding Kennel** ☒ **Pet Shop** ☐ **Public Auction** ☐
BUSINESS NAME: ADKINS PET CENTER
OWNER:
ADDRESS: 3926 EAST HWY 27 IRON STATION
TELEPHONE: (704) 736-4215
VMO HUNTER
COUNTY LINCOLN

Number of Primary Enclosures 126 **Animals Present: Dogs** 55 **Cats** 18

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: 9/17/08 Time: 12:23

Shelley J. Swaim
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 INSPECTION CONTINUATION PAGE

LICENSE #: 10728
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☒ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: ADKINS PET CENTER
OWNER:
ADDRESS: CONT
TELEPHONE: (_____)_____-_____

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
1	DRYWALL AND DOORFRAME IN ADOPTION CAT AREA DAMAGED FROM SCRATCHING EXPOSING POUROUS SURFACES THAT ~~COULD~~ CANNOT BE SANITIZED. REPAIR / RESEAL WITH MATERIAL THAT IS IMPERVIOUS TO MOISTURE.	
	K-9 GRASS IN OUTSIDE COMMON AREAS DAMAGED IN SEVERAL SPOTS - REPAIR THESE AREAS	
1 7	OUTSIDE KENNELS EPOXY SEALING IS PEELING UP - REPAIR & OR RESEAL	
15	OUTSIDE ACCESSORIES AND WATER RELEPTACLES ARE DAMAGED FROM CHEWING MAKING SANITATION DIFFICULT - REPLACE AS NEEDED	
2	THERE IS A STRONG ODOR IN KENNEL B - INCREASE VENTILATION IN THIS AREA - FLUSH DRAINS?	
14	MAKE SURE THERE IS ONE LITTER BOX FOR EVERY THREE CATS IN A PRIMARY ENCLOSURE	
		JAN 1, 2009

☒ APPROVED ☐ CONDITIONALLY APPROVED ☐ DISAPPROVED Date: 9/17/08 Time: 12:23

Shelley J. Swain
Inspector's Signature

Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

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