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: 35.33240 **W:** 79.96159

LICENSE #: _____
TYPE FACILITY: Animal Shelter (Private/Public) ☒ **Boarding Kennel** ☐ **Pet Shop** ☐ **Public Auction** ☐
BUSINESS NAME: Montgomery Co Animal Shelter
OWNER: Montgomery Co Leon Everitt
ADDRESS: 442 Landfill Rd Mt Gilliard
TELEPHONE: (910) 592-3067
VMO Hunter
COUNTY Montgomery

Number of Primary Enclosures 20 **Animals Present: Dogs** 3 **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
- N/A 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: 7-1-08 Time: 09:41

Shelley Swain
Inspector's Signature

Leon Everitt
Owner/Authorized Agent's Signature

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

NCDA&CS, VETERINARY DIVISION
ANIMAL WELFARE SECTION,
1030 MAIL SERVICE CENTER,
RALEIGH, NC 27699-1030
PHONE: 919/715-7111, FAX: 919/733-6431

ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: _____
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: MONTGOMERY Co ANIMAL SHELTER
OWNER: _____
ADDRESS: CONT
TELEPHONE: (_____)_____-_____

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
	CLEANING PROTOCOL HAS BEEN ADJUSTED TO PREVENT CROSS CONTAMINATION.	
	WOODEN & WIRE CAT CAGES HAVE BEEN REMOVED AND CATS WILL BE HOUSED IN SMALL KENNELS IN FRONT OF BUILDING.	
1	PERIMETER FENCE IS DAMAGED TO THE POINT THAT ANIMALS COULD ESCAPE REPAIR PERIMETER FENCING	30 days
7	DRAIN OPENINGS IN BACK OF KENNELS AND IN KENNEL 1 & 2 ARE UNFINISHED – FINISH OUT MAKING IMPERVIOUS TO MOISTURE	30 days
26	NEED MORE INFORMATION ON ORIGIN AND DISPOSITION PAPERWORK – OWNER INFO ON RTO'S AND ADOPTIONS	

☐ APPROVED ☒ CONDITIONALLY APPROVED ☐ DISAPPROVED Date: 7/1/08 Time: 09:45

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

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