Type of Inspection
New ☐ _____
Annual ☐ _____
Follow-Up 4-8-08
(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 5-16-08

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 35.16625 **W:** 79.40313

LICENSE #: 10402
TYPE FACILITY: Animal Shelter (Private/Public) ☐ **Boarding Kennel** ☒ **Pet Shop** ☐ **Public Auction** ☐
BUSINESS NAME: Dog's Best Friend
OWNER: Bruce Werner
ADDRESS: 1070 Brook St. Ext., Southern Pines, NC 28387
TELEPHONE: (910) 695-3647
VMO Sholar
COUNTY Moore

Number of Primary Enclosures 43 **Animals Present: Dogs** 25 **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
N/A ☐ 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: 5-13-08 NB Time: 10:30Am

Pat M. Sholar
Inspector's Signature

Audrey Johnson
Owner/Authorized Agent's Signature

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

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ENTERED 5-16-08

ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: 10402
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☒ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Dog's Best Friend
OWNER:
ADDRESS:
TELEPHONE: (_____)_____-_____

Cont.

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
	Follow up from 4-8-08	
	Comments on Past inadequacies: Lobby door Casing has been replaced. New gates have replaced old damaged gates on outdoor exercise runs - Noted these gates are narrower Causing staff to use extra measures to keep gates in place - may expect to find warped gates in the future. Chain Link appears in good repair today on primary enclosures.	
	7) Inside Run - Damaged floor has still not been repaired - A "Do Not Use" sign must be placed on the run door.	
	7) Outside Exercise Pens that have holes and bare dirt - Must keep holes filled and supplied w/ adequate amount of gravel.	
	7) Chain Link on walkway gates is patched - must be replaced w/ good, undamaged ~~to~~ chain link.	
	Discussed Cleaning back side of lobby door w/ attendant today.	
	Remember to keep food storage containers covered, do waste disposal At least twice a day - more if needed, to keep entire facility Clean.	
	Today's inspection is Conditionally Approved. A Complete Approved rating will not be issued until the above items are addressed and no other issues come up.	
	Re-Inspect in 30 days.	

☐ APPROVED ☒ CONDITIONALLY APPROVED ☐ DISAPPROVED Date: 5-13-08 Time: 10:30 Am

Pat M. Shelar
Inspector's Signature

Audrey Johnson
Owner/Authorized Agent's Signature

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