Type of Inspection
New □ _____
Annual ☒ 2011
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: 34.25849 **W:** 77.83825

LICENSE #: 10792
TYPE FACILITY: Animal Shelter (Private/Public) □ **Boarding Kennel** ☒ **Pet Shop** □ **Public Auction** □
BUSINESS NAME: Olga's Dog Spa
OWNER: Olga Littleton
ADDRESS: 1147/118 Old Dairy Rd. Wilmington, NC 28405
TELEPHONE: (910) 256-5011 or 791-4848
VMO Hunter
COUNTY New Hanover

Number of Primary Enclosures 10 **Animals Present: Dogs** 8 **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 10/26/10 Time: 2:00pm

Peter Shelor
Inspector's Signature

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 CONTINUTATION PAGE

LICENSE #: 10792
TYPE FACILITY: Animal Shelter (Private/Public) ☐ **Boarding Kennel** ☒ **Pet Shop** ☐ **Public Auction** ☐
BUSINESS NAME: Olga's Dog Spa
OWNER:
ADDRESS:
TELEPHONE: (____) ____ - Cont.

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
	Items To Address:	
1)	Crate Room - from 6/22/10 inspection - Chewed door frames/moldings must be replaced.	
	Front Room - Repair sheetrock beside door on right side.	
	Grooming Room - Repair sheetrock beside window on right side.	
	Isolation Room Floor - Repair hole in linoleum.	
	Kitchen Area - Replace rotted backsplash.	
	Metal door into yard area - Address sharp/jagged edges.	
3)	Lighting - Isolation Room - Pot light in working order.	
7)	Outdoor Exercise Yard - Address holes - fill and gravel or regrass bare dirt areas.	
18)	Sanitation - Old + fresh feces was found on the wood ramp into the exercise yard. Owner has been warned not to allow dogs to lounge in this area. Feces must be removed at least two time a day.	
24) 25)	Records were not available (on site today). Records should be on site for examination during normal business hours.	
	Re-Inspect in 30 Calendar days (11/26/10)	

☐ **APPROVED** ☒ **DISAPPROVED** Date: 10/26/10 Time: 2:00 pm

R. M. Shelar
Inspector's Signature

Owner/Authorized Agent's Signature

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