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 1-25-08

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 34.75301 **W:** 77.38910

LICENSE #: 10320
TYPE FACILITY: Animal Shelter (Private/Public) □ **Boarding Kennel** ☒ **Pet Shop** □ **Public Auction** □
BUSINESS NAME: Animal House
OWNER: ~~Ruth Folkner~~ Julie Henderson
ADDRESS: 655 Bell Fork Rd, Jax, NC 28540
TELEPHONE: (910) 353 - 2684
VMO Sholar
COUNTY Onslow

Number of Primary Enclosures 250 **Animals Present: Dogs** 87 **Cats** 8

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
☒ 23. Description of Animals
□ 24. Records/Vet Treatment
N/A □ 25. Origin/Disposition
☒ 26. Signature (boarding kennel)
☒ 27. Written permission from owner for commingling (doggie daycare)

Transportation
☒ 28. Care in Transit Discussed

Veterinary Care
☒ 28. Isolation Facility
☒ 29. No Signs of Illness/ Treated

□ **APPROVED** ☒ **DISAPPROVED** Date: 1-24-08 Time: 3:30 pm

Pat M. Sholar
Inspector's Signature

Owner/Authorized Agent's Signature

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

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ENTERED 1-25-08

ANIMAL WELFARE INSPECTION CONTINUTATION PAGE

LICENSE #: 10320
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel X Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Animal House
OWNER:
ADDRESS:
TELEPHONE: (_____)_____-_____

Cont.

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
1)	Bottom of outside metal doors on Kennel buildings is showing some rust/Corrusion - needs attention.	
7)	Pool Room - 3 Kennels - drain covers are missing - do not use until drains are covered.	
	1 Kennel door on back of F Bldg. is hanging by one hinge - do not use until repaind.	
	Penthouse - many of the doors are rusting - need repainting.	
	Cat Tree - Rubber needs replacing - has been ordered.	
22)	Day Care Ratio - May only have 4 dogs without direct supervision. (5 Today)	
24)	Vet Treatment Records - Must log the strenght of the med. such as mg. or cc or Tsp. or TBS.	
7)	Gravel - More gravel is needed in outdoor exercise/daycare areas - Keep holes filled - no bare dirt is allowed.	
	Facility is Very Clean, dogs/cats look good.	
	Re-Inspect in 60 days.	

Also discussed checking temperature at dog level and areas where new paint is chipping. It is note 3 drain covers were found + put in place before I left Today - Good!

☐ APPROVED X DISAPPROVED Date: 1-24-08 Time: 3:30 pm

Patrn. Sholar
Inspector's Signature

Owner/Authorized Agent's Signature

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