Type of Inspection
New ☒ _____
Annual ☐ _____
Follow-Up _____
(Prev. Inspection Date)
Complaint ☐ _____
Courtesy ☐ _____
Random ☐ _____

CDA&CS, VETERINARY DIVISI
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: 35.51632 **W:** 77.40421

LICENSE #: _____
TYPE FACILITY: Animal Shelter (Private/Public) ☒ **Boarding Kennel** ☐ **Pet Shop** ☐ **Public Auction** ☐
BUSINESS NAME: Town of Winterville Public Works
OWNER: Town of Winterville
ADDRESS: 2571 Railroad ST Winterville NC 28590
TELEPHONE: (252) 714 - 9128
VMO Hunter
COUNTY Pitt

Number of Primary Enclosures 3 **Animals Present: Dogs** 1 **Cats** Ø

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
NA 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
NA 25. Records/Vet Treatment
☒ 26. Origin/Disposition
NA 27. Signature (boarding kennel)
NA 28. Written permission from owner for commingling (doggie daycare)

Transportation
NA 29. Care in Transit Discussed

Veterinary Care
NA 30. Isolation Facility
☒ 31. No Signs of Illness/ Treated

☐ **APPROVED** ☒ **DISAPPROVED** Date: 7/21/10 Time: 12:30pm

J. E. Blyn
Inspector's Signature

Leroy Smith Jr.
Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

White= Office Canary= Inspector Pink= Owner

'CDA&CS, VETERINARY DIVISI
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ANIMAL WELFARE INSPECTION CONTINUTATION PAGE

LICENSE #: _____
TYPE FACILITY: Animal Shelter (Private/Public) ☒ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Town of Winterville
OWNER: _____
ADDRESS: _____
TELEPHONE: (_____)_____-_____

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
	This is a new outdoor holding facility. The dogs are held for 3 days then Pitt Co Animal Control transports the dog to their shelter	
	There were (2) inadequacies that need addressing.	
	#6 Need to install 6" of gravel behind the kennel for drainage.	
	#7 Cover wood in the second kennel.	
	#20 Need to store food in seal container.	
	I will re-inspect in 30 days.	

☐ **APPROVED** ☒ **DISAPPROVED** Date: 7/21/10 Time: 12:40pm

J.E. [signature] — **Inspector's Signature**

Leroy Smith Jr. — **Owner/Authorized Agent's Signature**

AW-2
Rev. 1/07

White= Office Canary= Inspector Pink= Owner