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

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 35.54997 W: 77.35155

LICENSE #: 77
TYPE FACILITY: Animal Shelter (Private/Public) ☒ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Pitt Co Animal Shelter
OWNER: Pitt Co Government
ADDRESS: 4550 County Home Rd Greenville NC
TELEPHONE: (252) 902-1725
VMO Hunter
COUNTY Pitt

Number of Primary Enclosures 30 Animals Present: Dogs 36 Cats 21

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
- ☒ 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: 3/4/10 Time: 10:30am

J. E. [signature]
Inspector's Signature

Michele R Whaley
Owner/Authorized Agent's Signature

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

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ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: 77
TYPE FACILITY: Animal Shelter (Private/Public) ☒ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Pitt Co Animal Shelter
OWNER:
ADDRESS:
TELEPHONE: (_____)_____-_____

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
	I performed a courtesy inspection on today's date. The shelter over all look good. However there are some inadequacies that need to be addressed.	
#7	X Puppy Room - The wire racks inside the kennels need to be repaired or replaced. The exposed wiring can hold germs and bacteria which can lead to disease outbreak. The plastic trays that are broken need to be replaced. The vent in the ceiling of the puppy room needs to be cleaned.	
#14	X New Kennel Area. There needs to be installed barriers between the bottom of the dog kennels. The current way allows for cross-contamination between kennels. If blocked this would not allow the transfer of bacteria and germs. The barrier utilized in pen R on the outside pen would work ok.	
	X Pen D need to seal the concrete.	
	I have addressed these issues before on prior inspections.	
	I am disapproving this inspection today. I will perform a follow-up within 60 days.	

☐ APPROVED ☐ CONDITIONALLY APPROVED ☒ DISAPPROVED Date: 3/4/10 Time: 10:25

J. E. [illegible]
Inspector's Signature

Michele B Whaley
Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

White= Office Canary= Inspector Pink= Owner