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 ☒

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 35.22965 **W:** 82.12587

LICENSE #: 8
TYPE FACILITY: Animal Shelter (Private/Public) ☒ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Foothills Humane Society
OWNER: Bob Thon (President)
ADDRESS: 989 Little Mnt. RD Columbus N.C.
TELEPHONE: (828) 863-4444
VMO Hunter
COUNTY Polk

Number of Primary Enclosures 55 **Animals Present: Dogs** 24 **Cats** 44

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
- NA 27. Signature (boarding kennel)
- NA 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: 2-15-10 Time: 2:20

Gary Stamey
Inspector's Signature

Stephanie Caldwell
Owner/Authorized Agent's Signature

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

Animal Welfare Section
NC Department of Agriculture and Consumer Services
1030 Mail Service Center
Raleigh, NC 27699-1030
phone: (919) 715-7111 FAX: (919) 733-6431
e-mail: agr.aws@ncagr.gov URL: www.ncaws.com

Animal Welfare Section, NCDA&CS
Euthanasia Inspection Report

Name of business: Foothills Humane Society

City: Columbus | License number (if currently licensed): 8 | license type: 44

Duties of a CET

Prepare animals for euthanasia .0418: N/A	Properly record all data .0418: N/A	Security, controlled substances .0418: N/A
Supervise Prob. CET .0418: N/A	Properly euthanize .0418: N/A	Properly dispose of dead .0418: N/A

no Euthanasia needed at this time.

Euthanasia by injection

IC only on anesth. or sedated .0501: N/A

Euthanasia by CO

Use only bottled gas .0601	Use only comm. mfd chamber .0601	Only same species in chamber .0601	In chamber for >= 20 min. .0601
Not used on < 16 weeks .0602	Not used on pregnant .0602	Not used on near death .0602	No live with dead .0603
Animals separated .0604	At least 1 viewport .0605	Chamber in good order .0605	Airtight seals present .0605
Light shatterproof .0605	Chamber sufficiently lit .0605	Electrical explosion-proof .0605	If inside, two CO monitors .0605

N/A

Records of monthly inspection .0606	Records of yearly inspection .0606	Visual inspection by AWS
	N/A	

Chamber cleaned b/t uses .0607	Operational guide & or manual .0608	>= 2 adults present when used .0609

Extraordinary methods

Reports of extraordinary euth. .0705:

Policy and procedure manual

Current copy of AWA in manual .0803: Adequate	Current AVMA euth. in manual .0803: Adequate	Current HSUS euth. in manual .0803: Adequate	Current AHA euth. in manual .0803: Adequate
List of approved euth. methods .0803: Adequate	List of CETs & methods .0803: Adequate	Contact info for DVM in PVC .0803: Adequate	Contact info for DVM care . 0803: Adequate
List after hour euth. meth. 0803: Adequate	Euth. methods if no CET present 0803: Adequate	Policy for verifying death . 0803: Adequate	Contact info for suppliers. 0803: Adequate
DEA certificate . 0803: Adequate	MSDS sheets, chemical or gas . 0803: Adequate	MSDS sheets, tranq. or anesth. . 0803: Adequate	Signs & symptoms, human . 0803: Adequate
First aid information . 0803: Adequate	MD contact information . 0803: Adequate		

Gary Stamy — Signature of inspector | 2-15-2010 — date | page 2 of 3 | Stephanie Caldwell — Signature of management

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ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: 8
TYPE FACILITY: Animal Shelter (Private/Public) ☒ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Foothills Humane Society
OWNER: Bob Then
ADDRESS: 989 Little Mnt RD Columbus N.C.
TELEPHONE: (828) 863-4444

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
	No Euthanasia need at time of Inspection, but All Records from previous Euthanasia was in order. All drugs were secure and had been properly recorded. Policy + Procedure Manual was in place and 100% Complete.	
	Facility was in great Shape, very clean, no overcrowding and very few Animals in Isolation.	
	New Kennel Runs were still under construction and needs Secondary perimeter fence.	

☒ APPROVED ☐ CONDITIONALLY APPROVED ☐ DISAPPROVED Date: 2-15-10 Time: 2:20

Gary Stamy
Inspector's Signature

Stephanie Caldwell
Owner/Authorized Agent's Signature

AW-2
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White= Office Canary= Inspector Pink= Owner