

Type of Inspection

- New _____
- Annual _____
- Follow-Up 9/8/09
(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
11/18/09

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 34.79040 W: 78.90783

LICENSE #: 29

TYPE FACILITY: Animal Shelter (Private/Public) Boarding Kennel Pet Shop Public Auction

BUSINESS NAME: Robeson County Animal Shelter

OWNER: Robeson Co. Gov.

ADDRESS: 225 Landfill rd. St. Pauls, NC 28384

TELEPHONE: (910) 865-2200

VMO Sholar

COUNTY Robeson

Number of Primary Enclosures 108 Animals Present: Dogs 29 Cats 1

**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

Det M. Sholar

Inspector's Signature

[Signature]

Owner/Authorized Agent's Signature

Date: 11/17/09 Time: 10:00 Am

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ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: 29
 TYPE FACILITY: Animal Shelter (Private) (Public) Boarding Kennel Pet Shop Public Auction
 BUSINESS NAME: Robeson Co. A.S.
 OWNER: _____
 ADDRESS: _____
 TELEPHONE: () - _____ *Cont.*

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
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Follow-up from 9/8/09

Items that have been addressed:

1- 75 New Kennels have been installed. These complete the replacement of all the old kennels in the shelter. There are now no issues with cross contamination or damaged chain link.

Comments:

Temperature was 70° at 9:15 Am.

At this time of day the shelter has been cleaned, the dogs and cat fed and watered.

There were no outward signs of illness noted today.

APPROVED CONDITIONALLY APPROVED DISAPPROVED Date: 11/17/09 Time: 10:00 Am

Peter Shuler

 Inspector's Signature

James L...

 Owner/Authorized Agent's Signature