

Type of Inspection
 New _____
 Annual _____
 Follow-Up 2-11-08
 (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
 4-18-08

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 Co. An. Shelter
 OWNER: Robeson Co. Gov.
 ADDRESS: 255 Landfill Rd., St. Pauls, NC 28384
 TELEPHONE: (910) 845-2200
 VMO Sholar
 COUNTY Robeson

Number of Primary Enclosures 108 Animals Present: Dogs 54 Cats 4

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: 4-16-08 Time: 4:30 PM

Peter Sholar

Inspector's Signature

Jeff Bass

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

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 BUSINESS NAME: Robeson Co. An. Shelter
 OWNER: _____
 ADDRESS: Out
 TELEPHONE: () - _____

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
	Follow-up 2-11-08	
	Requested letter from Environmental Health Dept. has not been sent to office giving a time frame on installing the remaining kennels with cross contamination barriers and resting surfaces. Talked to Mr. Albert Lockloger today at EHD, and he plans to fax that letter to Raleigh on 4-17-08.	
	Today, kennel is clean, no signs of illness.	
	Re-Inspect in 60 days.	

APPROVED CONDITIONALLY APPROVED DISAPPROVED Date: 4-16-08 Time: 4:30pm

Pet n. Shala
 Inspector's Signature

JBA Bass
 Owner/Authorized Agent's Signature