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: 36.30125 **W:** 79.45546

LICENSE #: 105
TYPE FACILITY: Animal Shelter (Private/Public) ☒ **Boarding Kennel** □ **Pet Shop** □ **Public Auction** □
BUSINESS NAME: Rockingham Co Humane Society
OWNER: Sue Holland
ADDRESS: 205 Boon Rd Eden NC
TELEPHONE: (336) 623-4428
VMO Hunter
COUNTY Rockingham

Number of Primary Enclosures 100 **Animals Present: Dogs** 46 **Cats** 64

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: 6/29/10 Time: 11:00 13:00

Shelley Swann
Inspector's Signature

Sue Holland
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 #: _____
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Kochung Siam Co Humane Society
OWNER: _____
ADDRESS: _____ Cont
TELEPHONE: (_____)_____-_____

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
(6) (7)	Outside cattery housing 2 adult cats was constructed of 2x4's chainlink and chicken wire. There was scrap wood on floor and a tarp covered at least 3/4 of the enclosure. There was damaged chicken wire covering the inside of the enclosure door. 5J-.0203 (b) housing shall be constructed of material which is impervious to moisture and which can be easily disinfected. - Remove cats from this enclosure. Do not use until all wood has been replaced damaged wire removed, and floors and other accessories are removed/	
(2)	Ventilation throughout facility was inadequate - Improve ventilation	
(20) (5)	There were open bags of animal feed in several areas throughout facility including but not limited to - the outside cattery - Cat room - Cat Q - Newspaper Storage - Bird Room - Junk Room - Hallway Bedding and other accessories were ~~no~~ stored inadequately and not protected from contamination and/or	

☐ APPROVED ☐ CONDITIONALLY APPROVED ☑ DISAPPROVED Date: 4/29/10 Time: 13:42

Shelly D Swan
Inspector's Signature

Sue Holland
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 #: _____
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Rockingham Humane Society
OWNER: _____
ADDRESS: _____ Cont
TELEPHONE: (_____)_____-_____

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
infestation	Storage areas were cluttered and unorganized -	
	521.0201(d) Supplies of food and bedding shall be stored in containers which afford adequate protection them against infestation or contamination. All open bags of food shall be stored in airtight containers - Clean & organize storage areas	
(8)	All dogs housed inside the facility were kept in wire bottom cages and were provided no solid resting surface	
	521.0204(c) Each primary enclosure shall be provided with a solid resting surface to comfortably hold all occupants at the same time.	
(14)	Inspection took place at 11:00 AM many cages had not been cleaned and several animals had could not walk or lie down without coming into contact with waste or debris - Animals affected included but were not limited to - 2 small cats in G room - 2 terriers in laundry room -	
	Also noted were many of the litter boxes which had not been cleaned	
	521.0207 Waste shall be removed from primary enclosures to prevent contamination of dogs or cats	

☐ APPROVED ☐ CONDITIONALLY APPROVED ☒ DISAPPROVED Date: 6/29/10 Time: 13:42

Shelley J. Swain
Inspector's Signature

Sue Holland
Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

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ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: N/A
TYPE FACILITY: Animal Shelter (Private/Public) ☒ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Rockingham H.S
OWNER:
ADDRESS: Cont
TELEPHONE: (_____)_____-_____

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
	Increase cleaning frequency to a minimum of 2x daily.	
(23) (31) (25)	A & D DMH Hem x approx 5-6 wks Bilateral ocular discharge, nasal discharge - hind legs tail covered in diarrhea - lethargic A or ASH O Tabby 9-10 wk thin diarrhea Shep x O "Boots" - Surgical large hot spot at base of tail Ms Holland stated the two kittens were being treated and back given to the net - D there were no vet records or tx records The stated Boots was not being treated - I directed them to seek veterinary care for the three animals listed above and pay records to office by close of Business Also discussed record of veterinary care including treatments, immunizations, Records were very disorganized and it was difficult to verify vaccinations etc - Recomend keeping all records for each individual together to aid in inspection and improve organization	

☐ APPROVED ☐ CONDITIONALLY APPROVED ☒ DISAPPROVED Date: 6/15/10 Time: 13:42

Shelley J Swann
Inspector's Signature

Sue Holland
Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

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