Copy

Type of Inspection
New ☐
Annual ☐
Follow-Up _____
(Prev. Inspection Date)
Complaint ☒
Courtesy ☒
Random ☐

NCDA&CS, VETERINARY DIVISION
1030 MAIL SERVICE CENTER, RALEIGH, NC 27699-1030
PHONE: 919/733-7601, FAX: 919/733-2277

INDOOR ☐
OUTDOOR ☐
BOTH ☐

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 35.21116 **W:** 81.57028
QBSP Number – ☐☐ – ☐☐☐ – ☐☐ – ☐☐ – ☐

BUSINESS NAME: RUTHERFORD CO ANIMAL SHELTER **LICENSE #:** _____
OWNER: SHERIFFS OFFICE - SGT JAMES GREENE
ADDRESS: 576 LAUREL HILL DRIVE
TELEPHONE: (828) 287-6025 **VMO** _____ **COUNTY** RUTHERFORD
TYPE FACILITY: Animal Shelter ☒ Boarding Kennel ☐ Dealer ☐ Pet Shop ☐ Public Auction ☐
Number of Primary Enclosures 22 **Animals Present: Dogs** 28 **Cats** 12

Inspector: Mark "X" in box, if adequate. Circle 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 ~~Cat~~ BITE HOUSE

Primary Enclosures
☒ 7. Structure & Repair
☒ 8. Space
☐ 9. Ventilation & Temp.
☒ 10. Adequate Shelter

SANITATION
☐ 11. Waste Disposal
☐ 12. Odor ADOPTION CATS
☒ 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 understaffed
☒ 22. Animals' Appearance

SPECIAL ITEMS

Records
☒ 23. Description of Animals
☒ 24. Records/Vet Treatment
☒ 25. Origin/Disposition
N/A ☐ 26. Signature (boarding kennel)

Transportation
N/A Care in Transit Discussed

Veterinary Care
☐ 28. Isolation Facility
☐ 29. No Signs of Illness/ Treated

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
4	CRACKS - CHIPS - REPAIR & REPAINT	
5	VERY LITTLE STORAGE AVAILABLE	
6	STANDING WATER IN BITE HOUSING FACILITY - POOR DRAINAGE OUTSIDE KENNELS	
9	POOR VENTILATION IN BITE HOUSE & ADOPTION CAT AREA	
11	TRASH & CLUTTER - SPILLED FEED EUTHANASIA AREA	
12	STRONG ODOR IN ADOPTION CATS (DUE TO POOR VENTILATION	
20	FOOD NEES TO BE PLACED IN APROPRIATE STORAGE CONTAINERS	
21	SEVERELY UNDERSTAFFED	

☐ **APPROVED** ☐ **DISAPPROVED** Date: 6-28-06 Time: 16:17

Veterinarian: _____ Telephone: (____) _____-_____

Shelley Swain
Inspector's Signature

Owner/Authorized Agent's Signature

AW-2
Rev. 2/05 White= Office Canary= Inspector Pink= Owner