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 ☐

ENTERED

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 36.25476 **W:** 78.32485

LICENSE #: 49
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Vance Co Animal Shelter
OWNER: Vance Co Government
ADDRESS: 165 Vance Academy Rd Henderson NC 27537
TELEPHONE: (919) 492-3136
VMO Hunter
COUNTY Vance

Number of Primary Enclosures 31 **Animals Present: Dogs** 85 **Cats** 42

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
- NA 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** ☒ **DISAPPROVED** Date: 6/15/11 Time: 11:30am

Inspector's Signature **Owner/Authorized Agent's Signature**

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

NCDA&CS, VETERINARY DIVISION
ANIMAL WELFARE SECTION,
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ANIMAL WELFARE INSPECTION CONTINUTATION PAGE

LICENSE #: 49
TYPE FACILITY: Animal Shelter (Private/Public) ☒ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Vance Co Animal Shelter
OWNER:
ADDRESS:
TELEPHONE: (_____)_____-_____

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
	I performed a random inspection today. The shelter was being cleaned upon my arrival.	
	I observed some inadequacies that need to be addressed.	
#1 #7 #14	The shelter staff has erected some outside kennels to assist with the large number of dogs housed at the shelter. The staff installed screening for the kennel floor. The screening is a mixture of gravel and dirt. The kennels need to have 6" of gravel on the floor. The dogs are digging holes and my concern is dogs getting injured by the holes.	
#7	The concrete flooring has cracks that need to be sealed.	
#7	There are kennel gates that need to be repaired.	
#7 #10	The shelter utilize a small area for cats to be housed. I observed cats in traps that were recently caught. The shelter doesn't have enough cages or space to house these cats.	
	The shelter does utilize sprayers for the fly's but I observed quite a lot of fly's today.	
#17	I observed a numerous amount of flys with-in the shelter.	
#18	The gutters on the outside are full of pine straw and need to be cleaned out.	
	I am disapproving this inspection and I need a time line as to when these inadequacies will be addressed.	

☐ **APPROVED** ☒ **DISAPPROVED** Date: 6/15/11 Time: 11:30am

Inspector's Signature **Owner/Authorized Agent's Signature**

AW-2
Rev. 1/07

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