Type of Inspection
New ☐ _____
Annual ☒ 2010
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 7-9-09

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 35.37030 **W:** 77.95387

LICENSE #: 10768
TYPE FACILITY: Animal Shelter (Private/Public) ☐ **Boarding Kennel** ☒ **Pet Shop** ☐ **Public Auction** ☐
BUSINESS NAME: 3 Dog Nite Pet Resort + Spa
OWNER: Katelyn Murphy
ADDRESS: 104 Smith Berkley Blvd., Goldsboro, NC 27534
TELEPHONE: (919) 778-4495
VMO Sholar
COUNTY Wayne

Number of Primary Enclosures 13 **Animals Present: Dogs** 15 **Cats** 0

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
N/A ☐ 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: 7-8-09 Time: 3:45pm

Robin Sholar
Inspector's Signature

Teresa S. Kerr
Owner/Authorized Agent's Signature

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

NCDA&CS, VETERINARY DIVISION
ANIMAL WELFARE SECTION,
1030 MAIL SERVICE CENTER,
RALEIGH, NC 27699-1030
PHONE: 919/715-7111, FAX: 919/733-6431

ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: 10768
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☒ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: 3 Dog Nite
OWNER:
ADDRESS:
TELEPHONE: (_____) _____-_____

Cont.

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
7)	Enclosures #5, 7, 8, 9, 11 - All of these primary enclosures have either damage to the walls or damage to the inside of the doors. The tile "Cap" on the day care wall needs attention. Broken tiles replaced and missing tiles replaced. The "cap" on the gate for the small exercise area needs to be replaced. All areas on the day care walls that are damaged need to be addressed. There cannot be any holes in the walls anywhere. Owner needs to research materials that dogs cannot easily damage.	
8)	Two Pugs were housed in a crate that was up to AW space requirements. Attendant stated they were crated to prevent them from damaging the kennel door and wall. Must make other arrangements today.	
22)	Day Care Ratio was 5 with no attendant, Ratio is only 4 if unattended.	
25)	Vet Treatment Records - Owner needs to make available correct forms for attendants to use to assure meds are given correctly and food needs to be identified according to the dog.	
	Re-Inspect in 30 Working Days	

☐ APPROVED ☐ CONDITIONALLY APPROVED ☒ DISAPPROVED Date: 7-8-09 Time: 3:45pm

Patrick M. Shelar
Inspector's Signature

Teresa S. Kerr
Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

White= Office Canary= Inspector Pink= Owner