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: 35.76185 **W:** 77.96072

LICENSE #: 82
TYPE FACILITY: Animal Shelter (Private/Public) ☒ **Boarding Kennel** ☐ **Pet Shop** ☐ **Public Auction** ☐
BUSINESS NAME: Wilson Co Animal Shelter
OWNER: Wilson Co Sheriff Dept
ADDRESS: 4001 N. Airport Rd Wilson NC
TELEPHONE: (252) 291-8142
VMO Hunter
COUNTY Wilson

Number of Primary Enclosures 20 **Animals Present: Dogs** 36 **Cats** 13

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** ☐ **CONDITIONALLY APPROVED** ☒ **DISAPPROVED** Date: 9/15/09 Time: 12:20pm

J. E. Blyn
Inspector's Signature

Maj. M. E. Walker
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 #: 82
TYPE FACILITY: Animal Shelter (Private (Public) ☒ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Wilson Co Animal Shelter
OWNER:
ADDRESS:
TELEPHONE: (_____)_____-_____

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
	#1 The cracks in the kennel floor and walls need to be sealed.	
	#2 Need to install thermometers in the kennel area.	
	#4 #7 The cracks in the primary enclosures need to be sealed.	
	#12 I did detect some odor in the shelter.	
	#13 I did observe some dry dog food outside the kennel area that needed to be swept up.	
	#20 I did observe open dog food bags around the shelter. The food stored in the outside storage building needs to be put on a pallet to keep the food bags off the floor.	
	#25 Need to establish a vet treatment sheet if the employees administer any medicine.	
	I am disapproving the shelter today. I will return in 45 days for a re-inspection.	

☐ APPROVED ☐ CONDITIONALLY APPROVED ☒ DISAPPROVED Date: 9/15/07 Time: 12:15pm

Inspector's Signature

Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

White= Office Canary= Inspector Pink= Owner