

Type of Inspection
 New
 Annual
 Follow-Up 10-7-10
 (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: 35.30735 W: 79.41536

LICENSE #: 18
 TYPE FACILITY: Animal Shelter (Private/Public) Boarding Kennel Pet Shop Public Auction
 BUSINESS NAME: moore County Animal Control
 OWNER: moore Co. Gov.
 ADDRESS: 5235 NC Hwy 15501 Carthage NC
 TELEPHONE: (910) 947-2858
 VMO Hunter
 COUNTY moore

Number of Primary Enclosures 100 Animals Present: Dogs 71 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
- 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

DISAPPROVED

Date: 12-10-10

Time: 11:00am-12:45pm

E. Deane

Inspector's Signature

Brooke Nelson

Owner/Authorized Agent's Signature

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ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: 18
 TYPE FACILITY: Animal Shelter (Private/Public) Boarding Kennel Pet Shop Public Auction
 BUSINESS NAME: Moore Co. Animal Control
 OWNER: _____
 ADDRESS: _____ (CONT)
 TELEPHONE: (____) _____ - _____

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
	Previous inspection performed on 10-7-10. Facility was denied their annual due to multiple inadequacies	
	- All floors reseal	
	- Wipe & sanitize cat cage doors daily	
	- Clean & sanitize refrigerator regularly	
	- Open bags of food shall be kept sealed.	
<u>Today's Inspection:</u>		
#4-	Ceiling, walls, floors: Floors in Small K-9 viewing room need to be resealed/repainted. Baseboard areas in K-9 viewing also need to be resealed.	
	- All cat rooms & hallway need to be resealed/repainted soon. These floors aren't in as bad of shape as others however they are beginning to crack & chip.	
*	All ceilings that were peeling have been fixed.	
*	All windows seals have been repainted	
*	All metal beams have been resealed	
*	All food is in sealed containers.	
*	Refrigerator in surgery room is clean & orderly.	
Everything looks great. Continue to keep up on your maintenance.		

APPROVED DISAPPROVED Date: 12-10-10 Time: 11:00am-12:45pm
 _____ E. Jew _____ Brooke Nelson
 Inspector's Signature Owner/Authorized Agent's Signature