ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 34° 6' 15.1" W: 78° 6' 56.6"

LICENSE #: 85

TYPE FACILITY: Animal Shelter (Private/Public) □ Boarding Kennel □ Pet Shop □ Public Auction □
BUSINESS NAME: Bladen County Animal Control

OWNER: Bladen Co Gov.
ADDRESS: 506 Smith Circle Dr., ElizabethTown, NC 28337
TELEPHONE: (910) 662 - 6918

COUNTY Bladen

Number of Primary Enclosures 6 □ CAT Animals Present: Dogs 9 □ Cats 4 □

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 □
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 □

SPECIAL ITEMS

Records
23. Description of Animals □
24. Records/Vet Treatment □
25. Origin/Disposition □
26. Signature (boarding kennel) □
27. Written permission from owner for commingling (doggie daycare) □

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 □

TRANSPORTATION

28. Care in Transit Discussed □

VETERINARY CARE

28. Isolation Facility □
29. No Signs of Illness/Treated □

□ APPROVED □ DISAPPROVED

Date: 1-29-08 Time: 11:00 AM

Inspector’s Signature

Owner/Authorized Agent’s Signature

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

PAGE 1 OF 2
**ANIMAL WELFARE INSPECTION CONTINUTION PAGE**

**LICENSE #: 85**

**TYPE FACILITY:** Animal Shelter (Private/Public) ☑ Boarding Kennel □ Pet Shop □ Public Auction □

**BUSINESS NAME:** Blood Co. Animal Control

**OWNER:** [Name redacted]

**ADDRESS:** [Address redacted]

**TELEPHONE:** [Number redacted]

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Explanation of Inadequacy (circled items above) And Recommendation For Compliance</th>
<th>Date Corrections Must Be Completed</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Follow-up from 11-29-07 Comments from 11-29-07 inspection:</td>
<td></td>
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<tr>
<td>3)</td>
<td>Space - Today there are no more than 2 dogs per run today. - Good.</td>
<td></td>
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<tr>
<td>3)</td>
<td>A computer has been added and staff are keeping records on it. Used to be specific on origin and disposition of each animal.</td>
<td></td>
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<tr>
<td>7)</td>
<td>Pellets that are exposed - Keeping platforms - need to be cut off smoothly, or put the raised surfaces back up.</td>
<td></td>
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<tr>
<td>4)</td>
<td>Painting has not been done and will not be done until move into new building.</td>
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<tr>
<td></td>
<td>A new virus code is now being used - One step fewer paws cases have been noted since starting to use this product. - Good.</td>
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<tr>
<td></td>
<td>Kennel Temp is 62° at 10:00 AM.</td>
<td></td>
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<tr>
<td></td>
<td>New Building is under construction - looking at July '08 for completion.</td>
<td></td>
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<tr>
<td>2)</td>
<td>More personnel are needed to maintain records and attend animal shelter.</td>
<td></td>
</tr>
</tbody>
</table>

Re-Inspect in 60 days

☐ APPROVED ❌ DISAPPROVED  

**Date:** 1-29-08  
**Time:** 11:00 AM

**Inspector's Signature:** [Signature redacted]  
**Owner/Authorized Agent's Signature:** [Signature redacted]