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

GPS Coordinates - N: 34° 61' 51" W: 78° 60' 54.3"

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) 822-6918
VMO Shelor
COUNTY Bladen

Number of Primary Enclosures 21 Fel. Animals Present: Dogs 29  Cats 34

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
24. Description of Animals
25. Records/Vet Treatment
26. Origin/Disposition
27. Signature (boarding kennel)
28. 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

VETERINARY CARE

30. Isolation Facility
31. No Signs of Illness/Treated

APPROVED □ CONDITIONALLY APPROVED □ DISAPPROVED

Inspector’s Signature

Owner/Authorized Agent’s Signature

Date: 6/5/07  Time: 12:06 pm

AW-2
Rev. 1/07

PAGE 1 OF 2
ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: 85
TYPE FACILITY: Animal Shelter (Private/Public)  Boarding Kennel  Pet Shop  Public Auction
BUSINESS NAME: Blacken Co. AC
OWNER:
ADDRESS:
TELEPHONE: (____) ____ - ___

<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>Follow-up from 6-208.</td>
<td>Blacken AC has moved into a new facility. It is located directly behind the old facility. Office area is still located in the old shelter.</td>
<td></td>
</tr>
<tr>
<td>Comments:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Shelter has heat and air conditioning, indoor/outdoor runs, a healthy cat room, a cat quarantine room. It has dog and cat drop off kennels.</td>
<td></td>
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</tr>
<tr>
<td>Discussed the outdoor kennels - if there are used in cold weather, some type of heat must be provided for each dog.</td>
<td></td>
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<tr>
<td>Discussed space in cat ages - Remember to keep all areas in concrete sealed. Remember to provide 1 food pan per dog.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Temperature is 65.0 at 10:30 AM.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Discussed personal issues - 1 part time person has been added at 15 hours per week. Shelter is using prison inmates and volunteers to take care of the shelter duties.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Approved

 Inspector’s Signature

 ► CONDITIONALLY APPROVED

 Owner/Authorized Agent’s Signature

 DISAPPROVED

 Date 11-5-08 Time:12:00 PM

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

 PAGE 2 OF 2