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: 33° 7' 61" W: 78° 40' 73"

LICENSE #: 10496
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☑ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Whiskers Inn
OWNER: Jil T. Failone
ADDRESS: 5470 S. Main St., Shallotte, NC 28470
TELEPHONE: (910) 754-5207
VMO Shallote
COUNTY Brunswick

Number of Primary Enclosures 28 Animals Present: Dogs 18 Cats 2

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

TRANSPORTATION

☑ 29. Care in Transit Discussed

VETERINARY CARE

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

APPROVED ☐ CONDITIONALLY APPROVED ☐ DISAPPROVED

Date 12-4-08 Time: 2:00 pm

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 CONTINUATION PAGE

LICENSE #: 10496
TYPE FACILITY: Animal Shelter (Private/Public) □ Boarding Kennel □ Pet Shop □ Public Auction □
BUSINESS NAME: Whiskers Inn
OWNER: 
ADDRESS: 
TELEPHONE: ( ) — Cont.

<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 10-7-08</td>
<td>Items addressed:</td>
<td></td>
</tr>
<tr>
<td>1. Inadequacies in Items #2, 6, 11 have been addressed.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Door to Play Area - Sheetrock Board is surrounding door from - 1 piece is still missing. Owner still needs to consider using some non-wood material as a door facing.</td>
<td></td>
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<tr>
<td>Comments:</td>
<td></td>
<td></td>
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<tr>
<td>Missing indoor/outdoor doggie door flaps - attended and stated there were recently damaged. Owner needs to replace these missing or damaged before next inspection.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Advise owner to closely monitor the condition of the indoor suite.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Remember daycare ratio is only 4 dogs in an exercise area. Today there were 6 dogs alone - corrected during inspection.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

APPROVED □ CONDITIONALLY APPROVED □ DISAPPROVED

Inspector's Signature

Owner/Authorized Agent’s Signature

Date: 12-3-08; Time: 2:00pm

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