CDA&CS, VETERINARY IVISIC
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: 35°57'24" W: 82°52'52"

LICENSE #: N/A
TYPE FACILITY: Animal Shelter (Private/Public) X  Boarding Kennel □  Pet Shop □  Public Auction □
BUSINESS NAME: Brother Wolf Animal Rescue
OWNER: Denise Blitz
ADDRESS: 31 Glendale Ave, Asheville, 28803
TELEPHONE: (828)308-9435
VMO Hunter
COUNTY Buncombe

Number of Primary Enclosures 15  Animals Present: Dogs 17  Cats 0

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
NA 7. Signature (boarding kennel)
NA 8. 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: 11/10  Time: 11:15

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 #: N/A**  
**TYPE FACILITY:** Animal Shelter (Private/Public)  
**BUSINESS NAME:** Brother Wolf Animal Rescue  
**OWNER:** Dense Bite  
**ADDRESS:** 31 Glenrose Ave Asheville 28803  
**TELEPHONE:** (828) 308 - 9435

<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>#1</td>
<td>Gravel needs to be added in outside play yards, 6&quot;</td>
<td></td>
</tr>
<tr>
<td>#2</td>
<td>Temp must be measured in all locations</td>
<td></td>
</tr>
<tr>
<td>#7</td>
<td>Chain link enclosures need to be repaired.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>All cracks in concrete need to be sealed around enclosures and around outside</td>
<td></td>
</tr>
<tr>
<td></td>
<td>play yards (upper play yard in general)</td>
<td></td>
</tr>
<tr>
<td>#25</td>
<td>All shot records must be at facility and up to date.</td>
<td></td>
</tr>
<tr>
<td>#26</td>
<td>Point of origin on all rescues at facility. Where they at before being surrendered to</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Brother Wolf. And what fostered they are in the care of.</td>
<td></td>
</tr>
<tr>
<td>#30</td>
<td>An isolation room must be established and labeled</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Re-inspect within 10 days</td>
<td></td>
</tr>
</tbody>
</table>

☐ APPROVED  ❌ CONDITIONALLY APPROVED  ☐ DISAPPROVED  

**Inspector's Signature**

**Owner/Authorized Agent's Signature**

Signed: [Signature]

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

**PAGE 2**  
**OF 2**