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: 35.18071 W: 80.36111

LICENSE #: 10477
TYPE FACILITY: Animal Shelter (Private/Public) ☑ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Wyoming Kennels
OWNER: Hunter
ADDRESS: 3921 tanner Pembrook Pk - Hampton, NC
TELEPHONE: 704/455-5500

Number of Primary Enclosures 53 Animals Present: Dogs 15 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

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 ☒ CONDITIONALLY APPROVED ☐ DISAPPROVED

Date: 1/4/10 Time: 1:55pm

Inspector’s Signature

Owner/Authorized Agent’s Signature

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

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**ANIMAL WELFARE INSPECTION CONTINUATION PAGE**

**LICENSE #:** 101147  
**TYPE FACILITY:** Animal Shelter (Private/Public)  
**BUSINESS NAME:** Wyolina Kennels  
**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>Last Inspection: 2-15-10:</td>
<td></td>
<td></td>
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</tbody>
</table>
* Repaint concrete walls & reseal floors.  
* Repaint chainlink where rusted.  |

**Today's Inspections:**  
#1- Keep all cracks sealed. Chainlink is rusted in various areas - repaint.  
Facility is currently making improvements to include:  
* Repairing walls  
* Replacing doors  
* Redoing test room  

* Temperature at time of inspection is 64° in Daycare Building & 54° in main kennel area.  
* Cleaning is on-going @ time of inspection.

**APPROVED**  
**CONDITIONALLY APPROVED**  
**DISAPPROVED**  

**Inspector's Signature:**  
**Owner/Authorized Agent’s Signature:**

**Date:** 11-4-10  
**Time:** 3:15 pm

**AW-2**  
**Rev. 1/07**

White= Office  
Canary= Inspector  
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