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°30'11" W: 8°0'17" 3

LICENSE #: 1047
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☑ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Wyoming Kennels
OWNER: 
ADDRESS: 1621 Pembroke Rd Harrisburg
TELEPHONE: (704) 455-5500
VMO Hunter
COUNTY Clay

Number of Primary Enclosures 47
Animals Present: Dogs 22 Cats

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

Inspector’s Signature

Owner/Authorized Agent’s Signature

Date: [Signature]
Time: [Signature]

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

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

**LICENSE #:**

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

**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></td>
<td>Insulation and Ceiling have been temp repaired - waiting for contractor and cooler weather</td>
<td>Will reseal Kennels by Oct 1, 2008</td>
</tr>
<tr>
<td></td>
<td>Food needs to be stored in sealed containers</td>
<td></td>
</tr>
</tbody>
</table>

**APPROVED** □ CONDITIONALLY APPROVED □ DISAPPROVED

Date: 10/05  Time: 09:14

**Inspector’s Signature:**

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

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

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