ANIMAL WELFARE INSPECTION

NCDA&CS, VETERINARY DIVISION
1030 MAIL SERVICE CENTER, RALEIGH, NC 27699-1030
PHONE: 919/733-7601, FAX: 919/733-2277

GPS Coordinates - N: ________ W: ________
QBSP Number - ________

BUSINESS NAME: Caldwell Co Animal Shelter
LICENSE #: 14
OWNER: Chad Barr - Director
ADDRESS: 889 Fairview Dr SW, Lenoir, NC 28645
TELEPHONE: (828) 751-8625
COUNTY: Caldwell

TYPE FACILITY: Animal Shelter, Boarding Kennel, Dealer, Pet Shop, Public Auction

Number of Primary Enclosures: 40
Animals Present: Dogs 24, Cats 30

Inspector: Mark “X” in box, if adequate. Circle item number, if inadequate. Use NA if not applicable.

STRUCTURE
Housing Facilities
K1. Structure & Repair
K2. Ventilation & Temp.
K3. Lighting
K4. Ceiling, Wall, Floors
K5. Storage
K6. Water Drainage

Primary Enclosures
K7. Structure & Repair
K8. Space
K10. 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
19. Adequate Feed/Water
20. Food Storage
21. Personnel
22. Animals’ Appearance

HUSBANDRY
23. Description of Animals
24. Records/Vet Treatment
25. Origin/Disposition

Transportation
26. Care in Transit Discussed

Veterinary Care
27. Isolation Facility
28. No Signs of Illness/Treated

Item Number Explanation of Inadequacy (circled items above) And Recommendation For Compliance
Date Corrections Must Be Completed

☐ Floors in main kennel area & primary enclosures need to be repaired & resealed or painted
☐ is primary method

☐ APPROVED ☐ DISAPPROVED Date: 6/24/06 Time: 15:29

Veterinarian:
Inspector’s Signature

Owner/Authorized Agent’s Signature

AW-2
Rev. 2/05
White= Office
Canary= Inspector
Pink= Owner