

Type of Inspection

- New _____
- Annual _____
- Follow-Up 5/16/07
(Prev. Inspection Date)
- Complaint _____
- Courtesy _____
- Random _____

NCDA&CS, VETERINARY DIVISION
 ANIMAL WELFARE SECTION
 1030 MAIL SERVICE CENTER,
 RALEIGH, NC 27699-1030
 PHONE: 919/715-7111, FAX: 919/733-6431

INDOOR
 OUTDOOR
 BOTH

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: W:

LICENSE #: 10242
 TYPE FACILITY: Animal Shelter (Private/Public) Boarding Kennel Pet Shop Public Auction
 BUSINESS NAME: Tail Waggers Doggy Daycare
 OWNER: Ingrid Eschmann
 ADDRESS: 167 Little Nine Rd Morhead City NC 28557
 TELEPHONE: (252) 728-1242 Cell (2) 252-240-3647
 VMO: Blomquist
 COUNTY: Carteret

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

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

- | | | |
|--|--|--|
| <p>STRUCTURE</p> <p><u>Housing Facilities</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> 1. Structure & Repair <input checked="" type="checkbox"/> 2. Ventilation & Temp. <input checked="" type="checkbox"/> 3. Lighting <input checked="" type="checkbox"/> 4. Ceiling, Wall, Floors <input checked="" type="checkbox"/> 5. Storage <input checked="" type="checkbox"/> 6. Water Drainage <p><u>Primary Enclosures</u></p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 7. Structure & Repair <input checked="" type="checkbox"/> 8. Space <input checked="" type="checkbox"/> 9. Ventilation & Temp. <input checked="" type="checkbox"/> 10. Adequate Shelter | <p>SANITATION</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 11. Waste Disposal <input checked="" type="checkbox"/> 12. Odor <input checked="" type="checkbox"/> 13. Ceiling, Wall, Floors <i>NOTE</i> <input checked="" type="checkbox"/> 14. Primary Enclosures <input checked="" type="checkbox"/> 15. Equipment & Supplies <input checked="" type="checkbox"/> 16. Washrooms, Sinks, Basins <input checked="" type="checkbox"/> 17. Insect/Vermin Control <input checked="" type="checkbox"/> 18. Building & Grounds <i>NOTE</i> <p>HUSBANDRY</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 19. Adequate Feed/Water <input checked="" type="checkbox"/> 20. Food Storage <input checked="" type="checkbox"/> 21. Personnel <input checked="" type="checkbox"/> 22. Ratio of 1:10 personnel to animals if >4 in primary enclosure or common area <input checked="" type="checkbox"/> 23. Animals' Appearance | <p>SPECIAL ITEMS</p> <p><u>Records</u></p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 23. Description of Animals <i>Discussed</i> <input checked="" type="checkbox"/> 24. Records/Vet Treatment <input checked="" type="checkbox"/> 25. Origin/Disposition <input checked="" type="checkbox"/> 26. Signature (boarding kennel) <input checked="" type="checkbox"/> 27. Written permission from owner for commingling (doggie daycare) <p><u>Transportation</u></p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 28. Care in Transit Discussed <p><u>Veterinary Care</u></p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 28. Isolation Facility <input checked="" type="checkbox"/> 29. No Signs of Illness/Treated |
|--|--|--|

APPROVED DISAPPROVED Date: 7/26/07 Time: 9:00am
 Inspector's Signature: J. K. [Signature] Owner/Authorized Agent's Signature: Ingrid Eschmann

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

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ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: _____
 TYPE FACILITY: Animal Shelter (Private/Public) Boarding Kennel Pet Shop Public Auction
 BUSINESS NAME: Trail Waggers Doggy Daycare
 OWNER: Ingrid Eschmann
 ADDRESS: 1167 Lible Nine Rd Monroeham City NC 28557
 TELEPHONE: (252) 728-1242

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
	We performed an inspection on today's date. The housing facility is just about completed. There are a couple issues that need to be finished up.	
	1) The room being utilized as isolated room will have a shower board wall installed. Also the flooring will be completed.	
	2) Repaint molding around the floor and seal.	
	The outside area has gravel done, and will be utilizing Astro-Turf to half.	
	Maintaining a fence company to install the fence within the next 10 days.	
	We discussed the protocol for recording keeping.	
	I will be returning in 2 weeks to check on progress.	
	At this time the inside of the facilities is approved. Waiting on outside play area to be completed.	

APPROVED DISAPPROVED Date: 7/26/07 Time: 9:00am
J. E. Blain J. Kuttrell
 Inspector's Signature Owner/Authorized Agent's Signature