

Type of Inspection

- New
- Annual
- Follow-Up _____
(Prev. Inspection Date)
- Complaint
- Courtesy
- Random

NCDA&CS, VETERINARY DIVISION
 P. O. BOX 26026, RALEIGH, NC 27611
 Phone: 919/733-7601, Fax: 919/733-2277

- INDOOR
- OUTDOOR
- BOTH

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: W:

QBSP Number - - - - -

BUSINESS NAME: Paradise Acres Boarding LICENSE#: 10518 JB
 OWNER: Christina Richardson
 ADDRESS: 358 S.W. GALWATER RD NEW PORT NC 28570
 TELEPHONE: (252) 223-3007 VMO _____ COUNTY CARTER
 TYPE FACILITY: Animal Shelter Boarding Kennel Dealer Pet Shop Public Auction
 Number of Primary Enclosures 45-D Animals Present: Dogs _____ Cats _____
10-C

Inspector: Mark "X" in box, if adequate. Circle 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
- 9. Ventilation & Temp.
- 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. Animals' Appearance

SPECIAL ITEMS

- Records
- 23. Description of Animals
 - 24. Records/Vet Treatment
 - 25. Origin/Disposition
 - 26. Signature (boarding kennel)
- Transportation
- 27. Care in Transit Discussed
- Veterinary Care
- 28. Isolation Facility
 - 29. No Signs of Illness/Treated

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
	ON THE INSPECTION OF 8/14/07 I NOTED THE FENCE ON THE OUTSIDE NEEDED SEALING. INSTEAD SEALING THE FENCE, THE OWNER HAS BOLTED VINYL TO THE FENCE.	
	IT WAS ALSO MENTIONED THE DOOR FRAMES BE COVERED. THIS HAS BEEN COMPLETED. THE OWNER UTILIZED VINYL TO COVER SAME. LOOKS GREAT.	
	GOING TO EITHER SOD OR GRAVEL ENTRANCE GOING OUT TO THE PLAY YARD. THE REST OF THE PLAY YARD IS GRASS COVERED.	

APPROVED DISAPPROVED Date: 9/20/07 MB Time: 11:50 AM

Veterinarian: _____ Telephone: (____) _____
 Inspector's Signature: J. E. [Signature] Owner/Authorized Agent's Signature: [Signature]