

Type of Inspection
 New _____
 Annual _____
 Follow-Up 4/20/10
 (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

ENTERED
 5/12/10

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 34.74321

W: 76.82210

LICENSE #: 20449

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

BUSINESS NAME: Premiere Pets

OWNER: Bev Little & Linda Johnson

ADDRESS: 5730-C HWY 70, Morehead City, NC 28557

TELEPHONE: (252) 240-3300

VMO Hunter

COUNTY Currit

Number of Primary Enclosures 4 K-9
4 Fel.

Animals Present: Dogs 7 + 1 person Cats 9

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

STRUCTURE

SANITATION

SPECIAL ITEMS

Housing Facilities

- 1. Structure & Repair
- 2. Ventilation & Temp.
- 3. Lighting
- 4. Ceiling, Wall, Floors
- 5. Storage
- 6. Water Drainage

- 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

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)

Primary Enclosures

- 7. Structure & Repair
- 8. Space
- 9. Ventilation & Temp.
- 10. Adequate Shelter

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

Transportation

- 29. Care in Transit Discussed

Veterinary Care

- 30. Isolation Facility
- 31. No Signs of Illness/Treated

APPROVED ~~CONDITIONALLY APPROVED~~ DISAPPROVED

Date: 5/10/10 Time: 9:45 AM

Pet 2 Shelter

Inspector's Signature

Beverly Little

Owner/Authorized Agent's Signature

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ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: 20449

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

BUSINESS NAME: Premiere Pats

OWNER: _____

ADDRESS: _____

TELEPHONE: () - Cont.

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
	<u>Follow-up from 4/20/10</u>	
	<u>Items Addressed:</u>	
	<u>1- Dog Room - The damaged wood molding has been removed and replaced with Ceramic tile. The Ceramic tile goes all around the door facing on the inside of the room.</u>	
	<u>2- The Sick Parvo positive puppy that was seen on 4/20/10 has recovered. It is housed in the quarantine area today. It looks bright and alert and shows no outward signs of illness. No other puppies have had Parvo since 4/20/10.</u>	
	<u>3- Owner met with her vet. and received a written protocol on cleaning which was reviewed today. Owner stated an isolation/quarantine policy was discussed with the vet. AWS regulations do not specify a specific isolation/quarantine period of time before animals may be sold.</u>	
	<u>4- Owner has addressed the damaged areas on the fiberglass cages.</u>	
	<u>Comments:</u>	
	<u>Owner has brought in 2 more cages to house puppies in. These have wire bottoms so remember solid resting surfaces are required.</u>	
	<u>Owner was not finished cleaning cages at the beginning of the inspection today.</u>	
	<u>No signs of any outward illness was noted during this inspection.</u>	

APPROVED ~~CONDITIONALLY APPROVED~~ DISAPPROVED

Date: 5/10/10 Time: 9:45 Am

[Signature]

Inspector's Signature

[Signature]

Owner/Authorized Agent's Signature