ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 36.295856 W: 76.64928

LICENSE #: 35
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Tri County Animal Shelter
OWNER: County Government
ADDRESS: 158 Icaria Rd, Tyler, NC
TELEPHONE: (252) 621-7513
VMO
COUNTY

Number of Primary Enclosures: 37 Animals Present: Dogs 35 Cats 25

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

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)

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 ☐ DISAPPROVED

Date: 10/4/10
Time: 2:20 pm

Inspector’s Signature: Virginia
Owner/Authorized Agent’s Signature:

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

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

ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: 36
TYPE FACILITY: Animal Shelter (Private/Public) □ Boarding Kennel □ Pet Shop □ Public Auction □
BUSINESS NAME: Tri County Animal Shelter
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>I performed a follow-up inspection today on 7/9/19. I investigated a complaint on the temperature within the shelter.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Since that inspection, the County has purchased A/C units for the shelter. The A/C units are at the shelter waiting on county employees to install the units. If county employees can’t do the work soon then Alexander Electric will install the units.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>I performed an annual inspection today and the shelter was within compliance.</td>
<td></td>
</tr>
</tbody>
</table>

APPROVED □ CONDITIONALLY APPROVED □ DISAPPROVED Date: 7/9/19 Time: 2:20p

Inspector’s Signature: __________
Owner/Authorized Agent’s Signature: Virginia White

White= Office
Canary= Inspector
Pink= Owner

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