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

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 35°09.028′ W: 78°58.910′

LICENSE #: 16647
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☑ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Caroline Boarding and Grooming
OWNER: Bob Crow Ford
ADDRESS: 408 Santa Fe Trail, Fayetteville, NC 28303
TELEPHONE: (910) 484-3656
VMO ☑ Shelter
COUNTY: Cumberland

Number of Primary Enclosures 20 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

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
23. Description of Animals
24. Records/Vet Treatment
25. Origin/Disposition
26. Signature (boarding kennel)
27. 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

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TRANSPORTATION

28. Care in Transit Discussed

VETERINARY CARE

28. Isolation Facility
29. No Signs of Illness/ Treated

APPROVED ☑ DISAPPROVED ☐

Date: 07-06-07 Time: 10:00 AM

Inspector’s Signature

Owner/Authorized Agent’s Signature

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

PAGE 1 OF 2
LICENSE #: 10647  
TYPE FACILITY: Animal Shelter (Private/Public)  □  Boarding Kennel  □  Pet Shop  □  Public Auction  □  
BUSINESS NAME: Carolina Boarding and Grooming  
OWNER: Bob Crawford  
ADDRESS: 402 Sante Fe Trail, Fuquay, NC 28623  
TELEPHONE: (910) 480-3656  

<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>1</td>
<td>Back side of K-2 door has been repaired with non-wood material.</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Inside runs - all damaged chain link has been replaced with new, heavier gauge wire - rusted pipes taken care of also.</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Resting surfaces are new in place.</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>All wood in back exercise area has been removed.</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>New runs - outside exercise area - have been built - old runs are not being used - plans to replace them within the next 2 months.</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>No dogs being boarded today. To view space issue but discussed this.</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Owner has created a moms card with all required items.</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Owner has done a very good job in correcting all inadequacies.</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Kennel is clean - Good Job!</td>
<td></td>
</tr>
</tbody>
</table>

X APPROVED  □ DISAPPROVED  
Date: 9-6-07  Time: 10:00 AM  

Inspector's Signature:  
Owner/AUTHORIZED AGENT'S Signature:  

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