ANIMAL WELFARE INSPECTION

LICENSE #: 10658
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☒ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Dog Days Inn
OWNER: Aimee Olsen
ADDRESS: 319 William St., Fayetteville, NC 28301
TELEPHONE: (910) 926 - 5700
VMO Naunter
COUNTY Cumberland

Number of Primary Enclosures 44 Animals Present: Dogs 63 Cats 1

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

VETERINARY CARE

20. Isolation Facility
31. No Signs of Illness/Treated

Transportation

29. Care in Transit Discussed

APPROVED

Owner/Authorized Agent’s Signature

Date 3/6/11 Time: 10:30 AM

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

PAGE 1 OF 2
ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: 10858
TYPE FACILITY: Animal Shelter (Private/Public)  □  Boarding Kennel  □  Pet Shop  □  Public Auction  □
BUSINESS NAME: Dog Days Inn
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>Follow up from 11/19/11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Items Addressed:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Breeding Room - The clear on the air return in the ceiling has been repaired.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Dog Can Room - The ceiling tile has been put back in place so there is not a hole in the ceiling.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Dog Can Room - All of the gate/wire issues have been addressed.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Space - The owner has created 2 extra large enclosures/kennels for the massive breeds and coats when owner request dogs be housed together.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Sanitation - Cob webs have been cleaned away and walls look cleaner.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Records - Owner faxed the 4 updated Rabies certificates to our office on 11/19/11.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Comments:

- Owner has placed thermometers in the Kennel area. Temperatures were 61° - 67° at 10:10 AM.
- Remember to provide resting surfaces for all dogs. If it is detrimental to their health, note on Cage Card.
- Remember all dogs are required to have access to water at all times.
- Remember to keep Cage Cards updated on Rabies, etc.
- Owner needs to work toward replacing the men worn Kennels.

☑ APPROVED  □ DISAPPROVED  Date: 3/03/11  Time: 10:30AM

[Signatures]

Inspector’s Signature  Owner/Authorized Agent’s Signature

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