ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 35.0748 W: 78.93342

LICENSE #: 077
TYPE FACILITY: Animal Shelter (Private/Public) ☑ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: SPCA of Cumberland Co.
OWNER: Martha Hoar
ADDRESS: 3232 Boss Blvd, Fayetteville, NC 28303-3957
TELEPHONE: (910) 847-4132
VMO: Cumberland
COUNTY: Cumberland

Number of Primary Enclosures 67
Animals Present: Dogs 0 Cats 31

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 ☑
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 ☑
24. Description of Animals ☑
25. Records/Vet Treatment ☑
26. Origin/Disposition ☑
27. Signature (boarding kennel) ☑
28. Written permission from owner for commingling (doggie daycare) ☑
29. Care in Transit Discussed ☑
30. Isolation Facility ☑
31. No Signs of Illness/Treated ☑

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 ☑

Disapproved

Approved

Conditionally Approved

Date: 3/8/11 Time: 2:30 pm

Inspector’s Signature

Owner/Authorized Agent’s Signature

PAGE 1 OF 2
## Animal Welfare Inspection Continuation Page

**License #:** 27

**Type Facility:** Animal Shelter (Private/Public) ☑ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐

**Business Name:** SPCA of Cumberland Co.

**Owner:**

**Address:**

**Telephone:** ( )

### Item Number

<table>
<thead>
<tr>
<th>Item Addressed from 6/07/10 Inspection</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>Outdoor exercise yard - today's inspection found the outdoor exercise yard in good shape. Holes were filled and winter grass was growing and covering the ground.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Comments:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Both dogs housed at the shelter on 6/07/10 have passed away. There are no dogs housed now and the owner is not taking any more dogs in.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>There are 31 cats housed today - 4 less than on 6/07/10. Again, the owner is not taking in any more cats due to the owner's age. She plans to keep reducing the number of cats and eventually close the shelter.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Today the records were examined and found compliant. The facility is clean and odor-free. Temperature was 64° at 1:30 PM. There were no signs of untreated illness or injury. The cats looked well fed and cared for even though many are over 15 years old.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Approved** ☑ **Disapproved** ☐

**Date:** 3/29/11  **Time:** 2:30 PM

**Inspector’s Signature:** [Signature]  **Owner/Authorized Agent’s Signature:** [Signature]

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

PAGE 2 OF 2