ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 34.95573 W: 78.89005

LICENSE #: 14
TYPE FACILITY: Animal Shelter (Private/Public) Boarding Kennel □ Pet Shop □ Public Auction □
BUSINESS NAME: Cumberland County Animal Control
OWNER: Cumberland Co. Gov.
ADDRESS: 4744 Corporation Dr. P.O. Box 1859, Fayetteville, NC 28302-1859
TELEPHONE: (910) 381-6852
VMO: Writer
COUNTY: Cumberland

Number of Primary Enclosures: 20
Animals Present: Dogs 14, Cats 8

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

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

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)

Transportation
29. Care in Transit Discussed

Veterinary Care
30. Isolation Facility
31. No Signs of Illness/Treated

APPROVED □ DISAPPROVED

Date: 5/11/11 Time: 1:00 PM

Inspector’s Signature

Owner/Authorized Agent’s Signature

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

LICENSE #: 14
TYPE FACILITY: Animal Shelter (Private/Public) □ Boarding Kennel □ Pet Shop □ Public Auction □
BUSINESS NAME: Cumberland Co. AC
OWNER: Cont.
ADDRESS: Cont.
TELEPHONE: ( )

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Explanation of Inadequacy (circled items above) And Date Corrections Must Be Completed</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Comments:</td>
</tr>
<tr>
<td></td>
<td>Temperatures were 68°-70° in the indoor animal holding areas of the shelter.</td>
</tr>
<tr>
<td></td>
<td>There were no signs of untreated injury or illness — medical legs were present and adequate.</td>
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<tr>
<td></td>
<td>More feral cat boxes have been purchased and are in use.</td>
</tr>
<tr>
<td></td>
<td>The shelter has a new barcode system where each enclosure is identified.</td>
</tr>
<tr>
<td></td>
<td>Photos are now taken of each animal and the cage cards now include the photograph.</td>
</tr>
<tr>
<td></td>
<td>Transportation units were discussed with the shelter manager today.</td>
</tr>
</tbody>
</table>

☑ APPROVED □ DISAPPROVED Date: 5/11/11 Time: 1:00 pm

Inspector’s Signature
Owner/Authorized Agent’s Signature

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