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: 1050 Cooperation Dr., P.O. Box 1829, Fayetteville, NC 28302-1829
TELEPHONE: 910-321-4852
VMO Number □
COUNTY □ Cumberland □

Number of Primary Enclosures 300 Fe.
Animals Present: Dogs 107 Cats 98

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 □ CONDITIONALLY APPROVED □ DISAPPROVED

Date: 2/13/18 Time: 12:15 pm

Inspector’s Signature

Owner/Authorized Agent’s Signature
LICENSE #: 14

TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐

BUSINESS NAME: Cumberland Co. H.S.

OWNER: 

ADDRESS: 

TELEPHONE: 

Item Number | Explanation of Inadequacy (circled items above) And Recommendation For Compliance | Date Corrections Must Be Completed
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Comments:

Temperatures were 64°-68° in various animal holding areas of the shelter.

Shelter was clean and odor free.

There were no signs of untreated illness or injury noted.

Resting surfaces were in good shape and available for all the dogs.

The hecks have been installed in the large dog adoption and holding rooms. This ensures there are no occupied run/s head or areas contamination issues.

Medical logs and records of origin and disposition were examined and found compliant.

Approved

Inspector's Signature

Owner/Authorized Agent's Signature

ConditionaLly Approved

DISAPPROVED

Date: 2/11/11 Time: 12:15 PM

AW-2
Rev. 1/07

White= Office

Canary= Inspector

Pink= Owner

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