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° 07' 48.5" W: 78° 52' 54.7"

LICENSE #: 20154
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☐ Pet Shop X Public Auction ☐
BUSINESS NAME: Eutaw Village Pet Store
OWNER: Kena Jenkins
ADDRESS: 814 Elm St. Elly, NC 28303
TELEPHONE: (910) 485-4387
VMO Scholar
COUNTY Cumberland

Number of Primary Enclosures: 15
Animals Present: Dogs 4  Cats 4

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

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

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

Approved By: [Signature]

Date: 8-7-08 Time: 11:00 AM

Inspector’s Signature

Owner/Authorized Agent’s Signature

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

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**ANIMAL WELFARE INSPECTION CONTINUATION PAGE**

**LICENSE #**: 20154
**TYPE FACILITY**: Animal Shelter (Private/Public) □ Boarding Kennel □ Pet Shop □ Public Auction □
**BUSINESS NAME**: Eutaw Village Pet Store
**OWNER**: [Signature]
**ADDRESS**: [Address]
**TELEPHONE**: [Number]

<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></td>
<td>Follow-up from 7-17-08.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Comments:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>The puppy holding pen is now in compliance. All wood has been</td>
<td></td>
</tr>
<tr>
<td></td>
<td>covered in a non-wood material and there are no exposed nails.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Store is clean and no signs of illness are noted today.</td>
<td></td>
</tr>
</tbody>
</table>

**APPROVED** □ CONDITIONALLY APPROVED □ DISAPPROVED  
**Date**: 8-7-08  **Time**: 11:00 A.M.

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

**AW-2**  
**Rev. 1/07**  
White= Office  
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