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°54.031 W: 80°04.081

LICENSE #: 10363
TYPE FACILITY: Animal Shelter (Private/Public) □ Boarding Kennel □ Pet Shop □ Public Auction □
BUSINESS NAME: Thomasville Pet Center
OWNER: T.2 Brookdale Dr Thomasville
ADDRESS: 3360
TELEPHONE: (336) 476-5080
VMO □
COUNTY □

Number of Primary Enclosures 14 Animals Present: Dogs 13 Cats 0 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

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 □

Transportation

29. Care in Transit Discussed □

Veterinary Care

30. Isolation Facility □
31. No Signs of Illness/ Treated □

APPROVED □ DISAPPROVED □

Date: July 28, 2010 Time: 14:30 - 15:31

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 #: 10863
TYPE FACILITY: Animal Shelter (Private/Public)  □  Boarding Kennel  □  Pet Shop  □  Public Auction  □
BUSINESS NAME: Thomasville Vet Center
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>1</td>
<td>Special care needed in Kennel flooring to prevent spread of disease. Remove moisture.</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>No signature at deposition - Acquire signature at time of release and date of release. Maybe recorded in regular record.</td>
<td></td>
</tr>
</tbody>
</table>

APPROVED  □  DISAPPROVED  Date: July 28, 2010  Time: 14:30

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

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