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: 34.53798  W: 78.36980

LICENSE #: ___
TYPE FACILITY: Animal Shelter (Private/Public)  
Boarding Kennel  □  Pet Shop □  Public Auction □
BUSINESS NAME: Town of Magnolia
OWNER: Town of Magnolia
ADDRESS: P.O. Box 459  240 Treatment St., Magnolia, NC 28453
TELEPHONE: (910) 289-3505
VMO  
COUNTY  Duplin

Number of Primary Enclosures 2  Animals Present:  Dogs 0  Cats 0

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  □  CONDITIONALLY APPROVED  □  DISAPPROVED  □

Inspector’s Signature  

Owner/Authorized Agent’s Signature  

Date: 6/18/10 Time: 11:30 AM

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

PAGE 1 OF 2
**ANIMAL WELFARE INSPECTION CONTINUATION PAGE**

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**BUSINESS NAME:** Town off Magnolia

**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>New Licensing Inspection Today - Follow-up also from 5/19/10</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Items Addressed:**

1. A gravel border has been laid to handle the wash water from hosing the pens. Advised to keep gravel clean at both ends of the pens.

2. Tents have been purchased and on site for sheltering the pens. Food and water bowls are on site as well. Advised to have larger water containers for use during hot weather.

3. The grounds surrounding the pens have been cleaned and mowed.

4. Records - Forms have been created and records were on site for examination. Reminded to get the owner's signature and full contact information if the dog is owner surrendered.

Remember to secure the chain link on the bottom of the gates - an oversight when installed.

No cats are going to be housed at this site. All trapped cats are taken that day to Kerensville.

**APPROVED**  

**CONDITIONALLY APPROVED**  

**DISAPPROVED**

**Date:** 5/18/10  
**Time:** 11:30 AM

**Inspector's Signature:**

**Owner/Authorized Agent's Signature:**

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