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°51′29″ W: 77°9′48.1″

LICENSE #: 41
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Duplin Co. Animal Shelter
OWNER: Duplin Co. Gov.
ADDRESS: 111 Middleton Cemetery, Kenansville, NC 28349
TELEPHONE: (919) 296-2159
VMO: Shelter
COUNTY: Duplin

Number of Primary Enclosures: 36
Animals Present: Dogs 13, Cats 15

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

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

APPROVED ☐ CONDITIONALLY APPROVED ☐ DISAPPROVED

Date: 10-3-08 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
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ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: 41
TYPE FACILITY: Animal Shelter (Private/Public)  Boarding Kennel  □ Pet Shop  □ Public Auction  □
BUSINESS NAME: Duplin Co. An. Shelter
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>3)</td>
<td>Main Kennel room - 1 set of lights are not working. Cat Room - 1 Set of lights are not working. All lights must be in working order.</td>
<td></td>
</tr>
<tr>
<td>12)</td>
<td>Odors are more noticeable today than on past inspections. It appears more attention is needed to keeping the area clean. All pens are clean.</td>
<td></td>
</tr>
</tbody>
</table>

Comments:
- Temperature on 72° at 12:15 pm in the cat room and K-9 area.
- A drain has been installed for the AC unit so that it drains outside now.
- Staff should pay more attention to cleaning behind kennels - spider webs and trash caught in the chain link.
- There were 3 sick kittens in the cat room today. AC assistant stated they had come in this morning and would be euthanized today.
- Remember to store all open bags of dry food in a covered container.

☑ APPROVED □ CONDITIONALLY APPROVED □ DISAPPROVED Date 7/28/08 Time: 1:00 pm

Owner/Authorized Agent's Signature: Julie Worley

Inspector's Signature: [Signature]