ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 35° 9.7639 W: 77° 55.438

LICENSE #: 8

TYPE FACILITY: Animal Shelter (Private/Public) □ Boarding Kennel □ Pet Shop □ Public Auction □
BUSINESS NAME: Edgecombe Co. Animal Shelter
OWNER: Edgecombe Co. Care-on-D
ADDRESS: 2961 N. MAIN ST 16-300 NC
TELEPHONE: (252) 641-7520
VMO: Blank
COUNTY: Edgecombe

Number of Primary Enclosures 20-Dog Animals Present: Dogs 4 Cats 5

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
23. Description of Animals □
24. Records/Vet Treatment □
25. Origin/Disposition □
26. Signature (boarding kennel) □
27. Written permission from owner for commingling (doggie daycare) □

Husbandry
28. Care in Transit Discussed □

Transportation

28. Isolation Facility □
29. No Signs of Illness/Treated □

Veterinary Care

APPROVED □ DISAPPROVED □

Date: 8/8/07 Time: 12:45 pm

Inspector’s Signature: Charles N. Collier
Owner/Authorized Agent’s Signature: Canary = Inspector

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

**LICENSE #:** 76

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

**BUSINESS NAME:** Edgecombe Co. Animal Shelter

**OWNER:** Edgecombe Co. Government

**ADDRESS:** 7709 N. Main St. 10-60-0 N.C

**TELEPHONE:** (252) 641-7520

<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>#7</td>
<td>Getting ready to seal Kennel Floor with epoxy paint.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Getting ready to order dog resting pads.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Need to fill in cracks in the bottom of Kennel Walls.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Everything else looks good.</td>
<td></td>
</tr>
</tbody>
</table>

**APPROVED ☑ DISAPPROVED ☐**

Date: 8/13/07  Time: 12:45

**Inspector's Signature**

**Owner/Authorized Agent's Signature**

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**AW-2**

**Rev. 1/07**

**White= Office**

**Canary= Inspector**

**Pink= Owner**

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