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: 35.45554 W: 77.66726

LICENSE #: 118
TYPE FACILITY: Animal Shelter (Private/Public) Boarding Kennel □ Pet Shop □ Public Auction □
BUSINESS NAME: Town of Snow Hill Holding Facility
OWNER: Town of Snow Hill
ADDRESS: 201 N. Greene ST Snow Hill, NC 28580
TELEPHONE: (919) 747-3414
VMO Greene County
COUNTY:

Number of Primary Enclosures 8 Animals Present: Dogs 13 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

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

Date: 9/1/07 Time: 2:49 p.m.

Inspector’s Signature

Owner/Authorized Agent’s Signature

White = Office
Canary = Inspector
Pink = Owner

PAGE OF
LICENSE #: 113
TYPE FACILITY: Animal Shelter (Private/Public) X Boarding Kennel □ Pet Shop □ Public Auction □
BUSINESS NAME: Town of Snow Hill Holding Facility
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>#7</td>
<td>Need to cover the doggie doors on cage #1 #2.</td>
<td></td>
</tr>
</tbody>
</table>

☑ APPROVED □ CONDITIONALLY APPROVED □ DISAPPROVED  Date: 9/1/09  Time: 2:54PM

Inspector’s Signature

Owner/Authorized Agent’s Signature

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

PAGE 2 OF 2