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: ________ W: ________

LICENSE #: 13
TYPE FACILITY: Animal Shelter (Private/Public) □ Boarding Kennel □ Pet Shop □ Public Auction □
BUSINESS NAME: ____________________________
OWNER: ___________________________________
ADDRESS: 4525 West Wendover Ave Greensboro
TELEPHONE: (336) 397-5020
VMO ____________________________
COUNTY _______________

Number of Primary Enclosures 500 Animals Present: Dogs 460 Cats 335

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

Transportation
☐ 29. Care in Transit Discussed

Veterinary Care
☐ 30. Isolation Facility
☐ 31. No Signs of Illness/Treated

Date: 12/27/09 Time: 1:00

Approved

Owner/Authorized Agent's Signature

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

PAGE 1 OF 2
**LICENSE #: 13**
**TYPE FACILITY: Animal Shelter (Private/Public)**
**BUSINESS NAME: United Animal Shelter**
**OWNER:** Linda Johnson
**ADDRESS:** 4925 West Wendover Ave, Greensboro NC 27405
**TELEPHONE:** (336) 297-8000

<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></td>
<td>Came by today to look at the shelter and do an inspection. They have done all the painting we circled at our last inspection. Need to fix some cracks. In the lower, they were using...</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Ventilation fans are going, might be a good idea to put ventilation fans on a timer. The other ventilation fans were going and doing a great job. This place smells great, they use sprays and chemcas. That are great smells, just. They added some new signs, good job. They have come a long way with the improvements. Good job. Keep up the good work here at the shelter. Make sure rodent control circuity continues on intake sheet.</td>
<td></td>
</tr>
</tbody>
</table>

**APPROVED**
**CONDITIONALLY APPROVED**
**DISAPPROVED**

**Inspector’s Signature**

**Owner/Authorized Agent’s Signature**