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: 36.03769 W: 79.49410

LICENSE #: 10205
TYPE FACILITY: Animal Shelter (Private/Public) □ Boarding Kennel ✧ Pet Shop □ Public Auction □
BUSINESS NAME: Pets U Love
OWNER:
ADDRESS: 933 S Chapman St
TELEPHONE: (336) 379-7377
VMO Hunter
COUNTY Guilford

Number of Primary Enclosures 17 Animals Present: Dogs 2 Cats

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. Written permission from owner for commingling (doggie daycare)

Transportation
☒ 28. Care in Transit Discussed

Veterinary Care
☒ 29. Isolation Facility
☒ 29. No Signs of Illness/ Treated

☑ APPROVED ☒ DISAPPROVED

Date: March 1, 2010 Time: 14:17

Inspector’s Signature

Owner/Authorized Agent’s Signature

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

PAGE 1 OF 2
<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>1</td>
<td>If any animal has access to an outdoor enclosure then a secondary perimeter fence of at least 5' is required. All pens should be covered. Enclosures with keyless pens are not an acceptable solution until they do not leave animals unattended.</td>
<td>Done at time of inspection</td>
</tr>
<tr>
<td>8</td>
<td>At time of inspection, dogs had access to roam throughout facility allowing contact with wood and other surfaces that were not impervious to moisture or easily sanitized. Restraint animals movement within housing facility to primary enclosures or exercise area (supervised).</td>
<td></td>
</tr>
<tr>
<td>23 24 25</td>
<td>Inadequate records as they relate to origin, description and vaccination histories. Operators of boarding kennels shall maintain records of all dogs and cats showing: 1. Name, address of owner, date of entry 2. Description of animal, including breed, sex, age and color/markings.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Two boarding dogs &quot;Josie&quot; a female poodle and &quot;Kate&quot; a tri color poodle had no record of vaccinations. Review AVS and follow your veterinarian's recommendations.</td>
<td></td>
</tr>
</tbody>
</table>

**DISAPPROVED**

Date: 3/10  Time: 14:42

Owner/Authorized Agent’s Signature

**APPROVED**

Inspector’s Signature

**CONDITIONALLY APPROVED**

White= Office  Canary= Inspector  Pink= Owner

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