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° 01'26.9" W: 78° 45'01.9"

LICENSE #: 00844
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: 
OWNER: 
ADDRESS: 
TELEPHONE: (536) 325-7700
VMO: 
COUNTY: 

Number of Primary Enclosures 21
Animals Present: Dogs 10, Cats 0

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

☑ APPROVED ☐ DISAPPROVED

Date: April 20, 2011
Time: 10:00

Inspector's Signature

Owner/Authorized Agent’s Signature
ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: 
TYPE FACILITY: Animal Shelter (Private/Public)  □ Boarding Kennel  □ Pet Shop  □ Public Auction  □
BUSINESS NAME:  
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>18(5)</td>
<td>Overall husbandry and sanitation greatly improved.</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Keep working on remaining clutter and organization of accessories and supplies.</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Ventilation greatly improved. There was no odor.</td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>There was no evidence of rodents. All animals had solid resting surfaces.</td>
<td></td>
</tr>
</tbody>
</table>

☐ APPROVED  □ DISAPPROVED  Date: April 21, 2011  Time: 10:00

Sheelea J. Swan  Owner/Authorized Agent's Signature

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

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