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 #: 10486
TYPE FACILITY: Animal Shelter (Private/Public) □ Boarding Kennel □ Pet Shop □ Public Auction □
BUSINESS NAME: Petsmart
OWNER: Petmart Inc.
ADDRESS: 2641 Leasburg Drive, Greensboro, NC
TELEPHONE: (334) 545-6285
VMO COUNTY

Number of Primary Enclosures 20 Animals Present: Dogs 0 Cats 17

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 □ Conditionally Approved □ Disapproved

Inspector’s Signature

Owner/Authorized Agent’s Signature

Page 1 of 2
ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: 10486
TYPE FACILITY: Animal Shelter (Private/Public) □ Boarding Kennel □ Pet Shop □ Public Auction □
BUSINESS NAME: Pet Mart 413
OWNER: 
ADDRESS: 2441 Lannister Drive, Greensboro, NC
TELEPHONE: (334) 545-6225

<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>Things looks just except need</td>
<td></td>
</tr>
<tr>
<td></td>
<td>address of where cat come from remains</td>
<td></td>
</tr>
<tr>
<td></td>
<td>is a surrender cat.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>9/19-740-8619</td>
<td></td>
</tr>
</tbody>
</table>

APPROVED ☒ CONDITIONALLY APPROVED □ DISAPPROVED □
Date: 9/16/05 Time: 11:30 AM

Inspector’s Signature: [Signature]
Owner/Authorized Agent’s Signature: [Signature]

White= Office  Canary= Inspector  Pink= Owner

AW-2 Rev. 1/07  PAGE 2 OF 2