ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 36° 35' 47" W: 77° 62' 70'1"

LICENSE #: 25
TYPE FACILITY: Animal Shelter (Private/Public) Boarding Kennel □ Pet Shop □ Public Auction □

BUSINESS NAME: Halifax Co Animal Shelter

OWNER: Halifax Co Government

ADDRESS: 568 Dog Pound Rd. Halifax NC 27839

TELEPHONE: (252) 588-7100

VMO: Halifax

COUNTY: Halifax

Number of Primary Enclosures: 36 - Dogs: 10 - 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

SPECIAL ITEMS

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

Inspector’s Signature

Owner/Authorized Agent’s Signature

Date: 3/6/03 Time: 4:45

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White=Office Canary=Inspector Pink=Owner PAGE 1 OF 2
LICENSE #: 25
TYPE FACILITY: Animal Shelter (Private) Boarding Kennel Pet Shop Public Auction
BUSINESS NAME: Halifax Co. Animal Shelter
OWNER: Halifax Co. Government
ADDRESS: 568 Dog Pound Rd Halifax NC 27839
TELEPHONE: (919) 583-4150

<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>#12</td>
<td>Need to control the odor within the building. The odor was strong when I entered the building.</td>
<td>✓</td>
</tr>
</tbody>
</table>

[Approved] [Conditionally Approved] [Disapproved]

Owner/Authorized Agent’s Signature: [Signature]

Inspector’s Signature: [Signature]

Date: [Date] Time: [Time]

Rev. 1/07
White= Office
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