

Entered  
INDOOR   
OUTDOOR   
BOTH

DA&CS, VETERINARY DIVISION  
ANIMAL WELFARE SECTION  
1030 MAIL SERVICE CENTER,  
RALEIGH, NC 27699-1030  
PHONE: 919/715-7111, FAX: 919/733-6431

**Type of Inspection**  
New   
Annual   
Follow-Up   
(Prev. Inspection Date)  
Complaint   
Courtesy   
Random  3-30-10

**ANIMAL WELFARE INSPECTION**

GPS Coordinates - N:   W:

LICENSE #: 10806  
TYPE FACILITY: Animal Shelter (Private/Public)  Boarding Kennel  Pet Shop  Public Auction   
BUSINESS NAME: Sandy Ridge Kennels  
OWNER: Brenda & Larry Wester  
ADDRESS: 65 Old Mill Rd. Fugway-Varina NC 27526  
TELEPHONE: (919) 552-1025  
VMO Hunter  
COUNTY Harnett

Number of Primary Enclosures \_\_\_\_\_ Animals Present: Dogs 7 Cats 0

Inspector: Mark "X" in each box, if adequate.  
Circle each item number, if inadequate.  
Use NA if not applicable

- |   |   |   |
|---|---|---|
| <p><b>STRUCTURE</b></p> <p><u>Housing Facilities</u></p> <p><input checked="" type="checkbox"/> 1. Structure &amp; Repair<br/><input checked="" type="checkbox"/> 2. Ventilation &amp; Temp.<br/><input checked="" type="checkbox"/> 3. Lighting<br/><input checked="" type="checkbox"/> 4. Ceiling, Wall, Floors<br/><input checked="" type="checkbox"/> 5. Storage<br/><input checked="" type="checkbox"/> 6. Water Drainage</p> <p><u>Primary Enclosures</u></p> <p><input checked="" type="checkbox"/> 7. Structure &amp; Repair<br/><input checked="" type="checkbox"/> 8. Space<br/><input checked="" type="checkbox"/> 9. Ventilation &amp; Temp.<br/><input checked="" type="checkbox"/> 10. Adequate Shelter</p> | <p><b>SANITATION</b></p> <p><input checked="" type="checkbox"/> 11. Waste Disposal<br/><input checked="" type="checkbox"/> 12. Odor<br/><input checked="" type="checkbox"/> 13. Ceiling, Wall, Floors<br/><input checked="" type="checkbox"/> 14. Primary Enclosures<br/><input checked="" type="checkbox"/> 15. Equipment &amp; Supplies<br/><input checked="" type="checkbox"/> 16. Washrooms, Sinks, Basins<br/><input checked="" type="checkbox"/> 17. Insect/Vermin Control<br/><input checked="" type="checkbox"/> 18. Building &amp; Grounds</p> <p><u>HUSBANDRY</u></p> <p><input checked="" type="checkbox"/> 19. Adequate Feed/Water<br/><input checked="" type="checkbox"/> 20. Food Storage<br/><input checked="" type="checkbox"/> 21. Personnel<br/><input checked="" type="checkbox"/> 22. Ratio of 1:10 personnel to animals if &gt;4 in primary enclosure or common area<br/><input checked="" type="checkbox"/> 23. Animals' Appearance</p> | <p><b>SPECIAL ITEMS</b></p> <p><u>Records</u></p> <p><input checked="" type="checkbox"/> 24. Description of Animals<br/><input checked="" type="checkbox"/> 25. Records/Vet Treatment<br/><input checked="" type="checkbox"/> 26. Origin/Disposition<br/><input checked="" type="checkbox"/> 27. Signature (boarding kennel)<br/><input checked="" type="checkbox"/> 28. Written permission from owner for commingling (doggie daycare)</p> <p><u>Transportation</u></p> <p><input checked="" type="checkbox"/> 29. Care in Transit Discussed</p> <p><u>Veterinary Care</u></p> <p><input checked="" type="checkbox"/> 30. Isolation Facility<br/><input checked="" type="checkbox"/> 31. No Signs of Illness/Treated</p> |
|---|---|---|

APPROVED     ~~CONDITIONALLY APPROVED~~     DISAPPROVED  
Date: 3-30-10 Time: 11:15am  
Inspector's Signature: [Signature]    Owner/Authorized Agent's Signature: [Signature]