ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 35.34.4.28  W: 78.7.94.0.6

LICENSE #: 44

TYPE FACILITY: Animal Shelter (Private/Public)  Boarding Kennel  Pet Shop  Public Auction

BUSINESS NAME: Harnett County Animal Control

OWNER: Harnett Co. Gov.

ADDRESS: 120 McEwen Place, Lillington NC

TELEPHONE: (910) 814-2952

VMO  Humber

COUNTY  Harnett

Number of Primary Enclosures 10  Animals Present: Dogs 29  Cats 23

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: 3-14-11  Time: 9:10am - 11:35am

Inspector’s Signature

Owner/Authorized Agent’s Signature

AW-2  White= Office  Canary= Inspector  Pink= Owner

Rev. 1/07

PAGE 1 OF 2
**ANIMAL WELFARE INSPECTION CONTINUATION PAGE**

**License #:** 44  
**Type Facility:** Animal Shelter (Private/Public)  
**Boarding Kennel**  
**Pet Shop**  
**Public Auction**  

**Business Name:** Huntet Co. Animal Control  
**Owner:** Huntet Co.  
**Address:**  
**Telephone:** (919) 314-52952

<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>#29:</td>
<td>Continue to reseal metal boxes on back of Animal Control boxes. Or replace as necessary.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Temp is 600°</td>
<td></td>
</tr>
<tr>
<td></td>
<td>No other inadequacies.</td>
<td></td>
</tr>
</tbody>
</table>

**APPROVED  □ DISAPPROVED**  
**Date:** 3-17-11  
**Time:** 9:16am - 11:35am

**Inspector’s Signature:** Ester  
**Owner/Authorized Agent’s Signature:** X.17

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

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