

Type of Inspection
 New _____
 Annual _____
 Follow-Up 4-19-07
 (Prev. Inspection Date)
 Complaint _____
 Courtesy _____
 Random _____

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

INDOOR
 OUTDOOR
 BOTH

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 35.00786 W: 79.21769

LICENSE #: 6513
 TYPE FACILITY: Animal Shelter (Private/Public) Boarding Kennel Pet Shop Public Auction
 BUSINESS NAME: Wake Raeford Humane Society
 OWNER: Michelle Sueja (Director)
 ADDRESS: 700 CC Steele Rd. Raeford, NC 28376 SR#1321
 TELEPHONE: (910) 875-5486
 VMO Sholar
 COUNTY Wake

Number of Primary Enclosures 20 Animals Present: Dogs 30 Cats 31

**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

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**
 23. Description of Animals
 24. Records/Vet Treatment
 25. Origin/Disposition
 26. Signature (boarding kennel)
 27. Written permission from owner for commingling (doggie daycare)

Primary Enclosures

7. Structure & Repair
 8. Space
 9. Ventilation & Temp.
 10. Adequate Shelter

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

28. Care in Transit Discussed

Veterinary Care

28. Isolation Facility
 29. No Signs of Illness/Treated

APPROVED DISAPPROVED Date: 6-19-07 Time: 10:45 AM

Pet. M. Sholar / J.E. Rhy
 Inspector's Signature

Michelle Sueja
 Owner/Authorized Agent's Signature

AW-2 Rev. 1/07

White= Office

Canary= Inspector

Pink= Owner

