ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 35.50274 W: 79.30394

LICENSE #: 42

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

BUSINESS NAME: Lee County Animal Shelter

OWNER: Lee County Animal Shelter

ADDRESS: 1450 N. Horner Blvd, Sanford, NC

TELEPHONE: (919) 774-7440

VMO □

COUNTY Lee

Number of Primary Enclosures 24 Animals Present: Dogs 23 Cats 5

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: 3-9-11

Time: 8:35am - 10:55am

Inspector’s Signature

Owner/Authorized Agent’s Signature

AW-2 Rev. 1/07

White= Office

Canary= Inspector

Pink= Owner

PAGE 1 OF 3
Animal Welfare Section, NCDA&CS
Euthanasia Inspection Report

Name of business: Lee County Animal Shelter
City: Sanford
License number (if currently licensed): 42
License type: 44

<table>
<thead>
<tr>
<th>Duties of a CET</th>
<th>Acceptable</th>
<th>Acceptable</th>
<th>Acceptable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prepare animals for euthanasia .0418</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Properly record all data .0418</td>
<td></td>
<td></td>
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<tr>
<td>Security, controlled substances .0418</td>
<td></td>
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<tr>
<td>Supervise Prob. CET .0418</td>
<td></td>
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<tr>
<td>Properly euthanize .0418</td>
<td></td>
<td></td>
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<tr>
<td>Properly dispose of dead .0418</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>N/A</td>
<td></td>
<td></td>
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</tbody>
</table>

Euthanasia by Injection

<table>
<thead>
<tr>
<th>Use only bottled gas .0601</th>
<th>Use only comm. mfd chamber .0601</th>
<th>Only same species in chamber .0601</th>
<th>In chamber for &gt;= 20 min. .0601</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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</tr>
<tr>
<td>Not used on &lt; 16 weeks .0602</td>
<td>Not used on pregnant .0602</td>
<td>Not used on near death .0602</td>
<td>No live with dead .0603</td>
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<tr>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Animals separated .0604</td>
<td>At least 1 viewport .0605</td>
<td>Chamber in good order .0605</td>
<td>Airtight seals present .0605</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Light shatterproof .0605</td>
<td>Chamber sufficiently lit .0605</td>
<td>Electrical explosion-proof .0605</td>
<td>If inside, two CO monitors .0605</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Records of monthly inspection .0606</td>
<td>Records of yearly inspection .0606</td>
<td>Visual Inspection by AWS</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chamber cleaned b/t uses .0607</td>
<td>Operational guide &amp; or manual .0608</td>
<td>&gt;= 2 adults present when used .0609</td>
<td></td>
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<tr>
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</table>

Extraordinary methods

<table>
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<tr>
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</thead>
<tbody>
<tr>
<td>Reports of extraordinary euth. .0705</td>
<td>Current copy of AWA in manual .0803</td>
<td>Current AVMA euth. in manual .0803</td>
<td>Current HSUS euth. in manual .0803</td>
</tr>
</tbody>
</table>

Policy and procedure manual

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</thead>
<tbody>
<tr>
<td>List of approved euth. methods .0803</td>
<td>List of CETs &amp; methods .0803</td>
<td>Contact Info for DVM in PVC .0803</td>
<td>Contact Info for DVM care .0803</td>
</tr>
<tr>
<td>Acceptable</td>
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<td>Acceptable</td>
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<tr>
<td>List after hour euth. meth. .0803</td>
<td>Euth. methods if no CET present .0803</td>
<td>Policy for verifying death .0803</td>
<td>Contact Info for Suppliers .0803</td>
</tr>
<tr>
<td>Acceptable</td>
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<td>Acceptable</td>
</tr>
<tr>
<td>DEA certificate .0803</td>
<td>MSDS sheets, chemical or gas .0803</td>
<td>MSDS sheets, tranqu. or anesth. .0803</td>
<td>Signs &amp; symptoms, human .0803</td>
</tr>
<tr>
<td>Acceptable</td>
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<td>Acceptable</td>
<td>Acceptable</td>
</tr>
<tr>
<td>First aid information .0803</td>
<td>MD contact information .0803</td>
<td></td>
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Signature of inspector: 3-9-11
Date
Page 2 of 3
Signature of management
**ANIMAL WELFARE INSPECTION CONTINUATION PAGE**

**LICENSE #:** 42

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**OWNER:**

**ADDRESS:**

**TELEPHONE:** (____) _______ - _______

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<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>
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<tbody>
<tr>
<td></td>
<td>This facility utilizes EBT only for euthanasia. They have done laugues with the LA chamber all together. All CETs were plentiful, and used as needed. All CETs showed the ability to maneuver through changing circumstances. CETs were confortable in the use of appropriate sedatives and euthanasia drugs. CETs were able to verify deaths by lack of respiration, pupil reflex, and lack of respirations.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Records inspected today consisted of all disposition records consisting of intake, adoption, and euthanasia. I viewed records from January 1, 2011 until now. Reports of previous extraordinary euthanasia are kept at the office. However, Sheriff's Dept. has recently taken over Animal Control and I will follow up with them on those records. I also viewed animal logs for the last year and all logs are in order.</td>
<td></td>
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#1 - Seal metal gates over drains. Replace ceiling tiles. Repaint cinder block walls.

Temperature is 60°

**APPROVED**  □ **DISAPPROVED**

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Time: 8:35am - 10:55am

[Signature]

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