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

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 35.80102 W: 82.64933

LICENSE #: 113
TYPE FACILITY: Animal Shelter (Private/Public) □ ○ Boarding Kennel □ ○ Pet Shop □ ○ Public Auction □
BUSINESS NAME: Madison County Animal Services
OWNER: Madison County
ADDRESS: 389 Long Branch Road, Marshall, NC 28753
TELEPHONE: (828) 649-3190

VMO Hunter
COUNTY Madison

Number of Primary Enclosures 44 Animals Present: Dogs 30 Cats 15

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 □ CONDITIONALLY APPROVED □ DISAPPROVED

Date: 3-26 Time: 2:00

Owner/Authorized Agent’s Signature

Inspector’s Signature

AW-2
Rev. 1/07

White= Office
Canary= Inspector
Pink= Owner

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ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: 113  
TYPE FACILITY: Animal Shelter (Private/Public) ✗ Boarding Kennel  □ Pet Shop  □ Public Auction  □
BUSINESS NAME: Madison County Animal Services  
OWNER: Madison County  
ADDRESS: 389 Long Branch Road, Marshall NC 28753  
TELEPHONE: (828) 644-3790

<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></td>
<td>Animal Control is now being more specific on where animals are picked up, such as Address, landmarks, Hwy names, etc.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Gravel has now been added in area behind facility near exercise yards and outdoor runs.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>New enclosures have been obtained for transportation.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Drain system has been repaired in isolation room taking a lot of the odor out. All wood covered</td>
<td></td>
</tr>
<tr>
<td>#4</td>
<td>Ceiling in back part of facility still in need of repair or replacement. - 30 days</td>
<td></td>
</tr>
<tr>
<td>#7</td>
<td>Construction of drains in back 1/2 of facility - #14 As noted in #7 to provide more sanitation in these areas. - 60 days</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Cat enclosures in ISO have been repaired, resealed and painted.</td>
<td></td>
</tr>
</tbody>
</table>

☐ APPROVED ✗ CONDITIONALLY APPROVED ☐ DISAPPROVED  
Date: 3-26  Time: 2:00

Inspector’s Signature: [Signature]  
Owner/Authorized Agent’s Signature: [Signature]  
White= Office  
Canary= Inspector  
Pink= Owner  

Aw-2  
Rev. 1/07  
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