

Type of Inspection

- New
- Annual
- Follow-Up _____
(Prev. Inspection Date)
- Complaint
- Courtesy
- Random

NCDA&CS, VETERINARY DIVISION
 1030 MAIL SERVICE CENTER, RALEIGH, NC 27699-1030
 PHONE: 919/733-7601, FAX: 919/733-2277

- INDOOR
- OUTDOOR
- BOTH

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 35.90464 W: 82.10270

QBSP Number - - - - -

BUSINESS NAME: MITCHELL Co ANIMAL SHELTER LICENSE #: 477 J-8

OWNER: _____

ADDRESS: 2492 Hwy 19E Spruce Pine NC 28777

TELEPHONE: (828) 765-6952 VMO _____ COUNTY MITCHELL

TYPE FACILITY: Animal Shelter Boarding Kennel Dealer Pet Shop Public Auction

Number of Primary Enclosures 52 Animals Present: Dogs 25 Cats 12

Inspector: Mark "X" in box, if adequate. Circle 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
- 9. Ventilation & Temp.
- 10. Adequate Shelter

AMBIENT TEMP 52°

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. Animals' Appearance

MDE: EBI

SPECIAL ITEMS

Records

- 23. Description of Animals
- 24. Records/Vet Treatment
- 25. Origin/Disposition
- 26. Signature (boarding kennel)

Transportation

- 27. Care in Transit Discussed

Veterinary Care

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

M.O.D. Dumpster

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
<u>Q</u>	<u>SEVERELY RUSTED DOORS IN KENNEL AREA - REC: REPLACE</u>	
<u>*</u>	<u>BIDS HAVE BEEN RECEIVED -</u>	
<u>Q</u>	<u>NO TX SHEETS AT THIS TIME - REC RECORD OF VET CARE INCLUDING TREATMENTS, IMMUNIZATIONS, DATE, TIME, NAME OF MEDICATION DOSAGE AND INITIALS - HAS BEEN DESIGNED BUT NOT YET IMPLEMENTED</u>	
<u>Q</u>	<u>NO ISOLATION FACILITY - REC: IF ANIMALS ARE GOING TO BE HELD & TREATED THERE MUST BE AN ISOLATION AREA</u>	
<u>Q</u>	<u>NOTICED TWO DOGS IN GENERAL POPULATION w/ NASAL DISCHARGE - THEY ARE BEING TREATED BUT NEED TO BE ISOLATED FROM GENERAL POPULATION</u>	

OTHER: DISCUSSED METHOD OF DISPOSAL FORMAL TIME LINE OUTLINING CORRECTIONS/REPAIRS DUE BY JAN 1, 2007

APPROVED DISAPPROVED Date: 12/6/2005 Time: 13:59

Veterinarian: JENNIE STEWART DVM Telephone: (828) 765-6952

Shelley Swain
Inspector's Signature

Dan Browder
Owner/Authorized Agent's Signature