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° 33' 24" W: 79° 9' 0" 69"  

LICENSE #:  
TYPE FACILITY: Animal Shelter (Private/Public)  
BOARDING KENNEL  
PET SHOP  
PUBLIC AUCTION  
BUSINESS NAME: Montgomery Co Animal Shelter  
OWNER: Montgomery Co  
ADDRESS: 492 Landfill Rd Mt. Gilead 27306  
TELEPHONE: (919) 572-3067  
VMO: Swaim  
COUNTY: Montgomery  

Number of Primary Enclosures: 9  
Animals Present: Dogs: 15  
Cats: 6  

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  
1. Waste Disposal  
2. Odor  
3. Ceiling, Wall, Floors  
4. Primary Enclosures  
5. Equipment & Supplies  
6. Washrooms, Sinks, Basins  
7. Insect/Vermin Control  
8. Building & Grounds  

HUSBANDRY  
9. Adequate Feed/Water  
10. Food Storage  
11. Personnel  
12. Ratio of 1:10 personnel to animals if >4 in primary enclosure or common area  
13. Animals' Appearance  

SPECIAL ITEMS  

Records  
14. Description of Animals  
15. Records/Vet Treatment  
16. Origin/Disposition  
17. Signature (boarding kennel)  
18. Written permission from owner for commingling (doggie daycare)  

Transportation  
19. Care in Transit Discussed  

VETERINARY CARE  
20. Isolation Facility  
21. No Signs of Illness/Treated  

Date: Sept 19, 2007  
Time: 10:00  

Owner/Authorized Agent's Signature:  

APPROVED  

DISAPPROVED  

 Inspector's Signature:  

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

PAGE 1 OF 4
ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #:
TYPE FACILITY: Animal Shelter (Private) Boarding Kennel  Pet Shop  Public Auction  
BUSINESS NAME: Montgomery Co Animal Shelter
OWNER:
ADDRESS: 
TELEPHONE: 

<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>1. Concreted block walls are unsealed, concrete floors and walkways are cracked and unsealed - repair, seal or paint making inimical to moisture</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. TEMPERATURE AT TIME OF INSPECTION WAS 70-75°. HOWEVER, MY BEAN REPORTED TO ME THAT TEMP. DURING THE PAST SUMMER WAS UNBEARABLE FOR BOTH EMPLOYEES AND ANIMALS - MAINTAIN AMBIENT TEMP 60-85°</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Insulation in storage area is falling from the ceiling - replace damaged insulation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Exposed wood in dog holding area - cats are housed in enclosures with wire bottoms and no solid resting surface to comfortably hold all occupants of the primary enclosure at the same time.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. There is a strong odor - shelter has not been cleaned or waste removed - cats are not provided a litter pan so have used their food receptacles. Litter box and other waste must be removed at least once a day.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Kennel - urine and vomit also noted. Rec: Waste shall be removed from primary enclosures to prevent contamination of the dogs and cats and to reduce disease hazards and odors. If hosing or flushing method is used to clean animals shall be removed during the cleaning process.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. There is evidence of old wet dog food in the areas in front of small kennels as well as a sour odor - this type of waste needs to be collected and disposed of properly. There is trash and building debris littering the property.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- APPROVED by Sullivan
- DISAPPROVED by Bean

Date: Sept 14, 2007  Time: 10:00

Inspector's Signature: Sullivan
Owner/Authorized Agent's Signature: Bean

AW-2  Rev. 1/07  White= Office  Canary= Inspector  Pink= Owner
PAGE 2 OF 4
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ANIMAL WELFARE SECTION,
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ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #:
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME:
OWNER:
ADDRESS:
TELEPHONE: (____) ______

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<tr>
<td>14</td>
<td>PRIMARY ENCLOSURES MUST BE PROPERLY CLEANED A MINIMUM OF 2 X PER DAY</td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>THE SMALL KENNELS HAVE LARGE INAPPROPRIATE FEED RECEPTACLES FOR THE SMALL DOGS HOUSED</td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>THERE ARE NOT ENOUGH FOOD RECEPTACLES # OF ADULT DOGS - FOR EVERY ADULT ANIMAL THERE MUST BE AT LEAST ONE FOOD RECEPTACLE OFFERED</td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>DIRTY WATER IN KENNEL HOLDING AREA AND SMALL KENNELS. ANIMALS SHALL HAVE ACCESS TO CLEAN WATER AT ALL TIMES</td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>FOOD STORAGE IS SUCH THAT BAGS OF FEED ARE EXPOSED TO DIRECT SUNLIGHT AND RAIN - REMOVE THESE DAMAGED OLD BAGS OF FEED AND DISPOSE OF THEM - STORE FEED WHERE IT IS NOT EXPOSED TO WEATHER</td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>AT 11:00 AM SHELTER HAD NOT BEEN CLEANED NOR ANIMALS EAT. THERE ARE ONLY TWO EMPLOYEES TO COVER ALL DUTIES AND CARE FOR THE SHELTER - REL. A SUFFICIENT # OF EMPLOYEES SHALL BE UTILIZED TO MAINTAIN THE PRESCRIBED LEVEL OF HUSBANDRY SET FORTH IN THE AWMA</td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>DOES ARE GETTING WET DURING THE CLEANING PROCESS - IF HOUSING METHOD IS USED TO CLEAN ANIMALS MUST BE REMOVED SEVERAL DOGS NOTED WITH SEVERE HAIR LOSS</td>
<td></td>
</tr>
<tr>
<td>46</td>
<td>NO TREATMENT FACILITY</td>
<td></td>
</tr>
<tr>
<td>48</td>
<td>SEE (33)</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>PERIMETER FEEDER IS DAMAGED IN SEVERAL PLACES REPAIR/REPLACE</td>
<td></td>
</tr>
<tr>
<td>*</td>
<td>IT WAS REPORTED TO ME BY MR. BEANS THAT THE CHAMBER IS LEAKING AND THERE WERE VISIBLE CRACKS</td>
<td></td>
</tr>
</tbody>
</table>

☐ APPROVED ☑ DISAPPROVED Date: Sept 19, 2007 Time: 10:00

Inspector's Signature

Owner/Authorized Agent's Signature

AW-2
Rev. 1/07
White= Office
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PAGE 3 OF 4
### Animal Welfare Continuation Page

**License #:**
**Type Facility:** Animal Shelter (Private/Public) ☑ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
**Business Name:** Montgomery Co Animal
**Owner:**
**Address:**
**Telephone:**

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<tr>
<td></td>
<td>As well as an insufficient gasket around door - there is also no mechanism to facilitate venting of this unit.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Inmates were on property and addressing chamber issues at 12:17. It appears that this co chamber even with corrections employed at this time will pose a significant risk to the safety and life of the operator. We recommend that this chamber not be used until such time that it has been inspected by an industrial hygienist and approved for use.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>There is no hot water or washroom facilities. Hot and running potable water must be available. Provide facilities such as washroom, basin, or sink to maintain cleanliness among caretakers, animals, and food and water receptacles.</td>
<td></td>
</tr>
</tbody>
</table>

**Approved** ☑ **Disapproved** ☐

**Date:** Sept 19, 2007  **Time:** 10:00

**Inspector's Signature:**

**Owner/Authorized Agent's Signature:**

**AW-2**
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