ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 35.33757  W: 79.46151

LICENSE #: 1146
TYPE FACILITY: Animal Shelter (Private/Public)  □  Boarding Kennel □  Pet Shop □  Public Auction □
BUSINESS NAME: Montgomery Co Animal Shelter
OWNER:
ADDRESS: 442 Landfill Rd, MT Grear
TELEPHONE: (910) 572-3067
VMO WATER
COUNTY Montgomery

Number of Primary Enclosures _______  Animals Present: Dogs 15  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

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

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

Transportation
28. Care in Transit Discussed

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

□ APPROVED  □ DISAPPROVED

Date: Nov 10, 2008  Time: 10:52

Inspector’s Signature

Owner/Authorized Agent’s Signature

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

PAGE 1 OF 2
ANIMAL WELFARE INSPECTION CONTINUATION PAGE

License #: 1140
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</td>
<td>Paperwork/Records was adequate</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Hole in fence has been repaired</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Primary enclosures had not been cleaned/removed</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Over the weekend and animals had not been fed</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Primary enclosures shall be cleaned/waste removed</td>
<td></td>
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<tr>
<td>6</td>
<td>A minimum of twice daily dogs and cats shall be fed at least once each 24 hour period</td>
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<tr>
<td>7</td>
<td>Puppies and kittens less than 6 months of age shall be fed at least twice in each 24 hour period</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Kennel #2 top row metal vent cover damaged - replace</td>
<td></td>
</tr>
</tbody>
</table>
| 9           | Provide adequate shelter for nursing puppies -                                     | 11/10/08 16:30 Commitment to [ ]

11/10/08 16:30 spoke with Leon Everitt - cleaning and feeding weekend protocol has been adjusted as per college. To be compliant with AWQA

☐ APPROVED ☐ CONDITIONALLY APPROVED ☒ DISAPPROVED

Inspector’s Signature: [Signature]
Date: 11/10/08 Time: 16:30
Owner/Authorized Agent’s Signature: [Signature]
Date: [ ] Time: [ ]