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°30'7" S W: 77°41'5"6'

LICENSE #: I8
TYPE FACILITY: Animal Shelter (Private/Public) ☑ Boarding Kennel □ Pet Shop □ Public Auction □
BUSINESS NAME: Moore County Animal Center
OWNER: Moore Co. Gov.
ADDRESS: 5235 HWY 15-501, Carthage, NC 28327
TELEPHONE: (910) 747-2958
VMO: Shelter
COUNTY: Moore

Number of Primary Enclosures 50 K9 50 Feline Animals Present: Dogs 35 Cats 24

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 ☑

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)

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 ☑

TRANSPORTATION

28. Care in Transit Discussed ☑

VETERINARY CARE

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

APPROVED ☑ DISAPPROVED ☐

Date: 10-10-07 Time: 1:30 pm

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 #: 18**  
**TYPE FACILITY:** Animal Shelter (Private/Public)  
**Boarding Kennel □ Pet Shop □ Public Auction □**  
**BUSINESS NAME:** Moore County Animal Center  
**OWNER:** Moore Co. Gov  
**ADDRESS:** 2235 Hwy 15-501, Carthage, N.C. 28327  
**TELEPHONE:** (910) 747-2858

<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>This shelter is very clean, records (all) are in order. Dogs and cats look well cared for.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>There is no AC in the Main K-9 Kennel area. It is in the budget for this year and work has begun to get ready to have it installed before spring 2003. Today the temperature was within range.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Resting Surfaces are not available in all the cat cages, manager has them on order. There are enough cages that it is rare that they would have more than 2 cats per cage unless it was a litter and mother.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Outside exercise yard - remove weed, pullet and remember to keep area that are not well grassed, around in gravel. Shelter has a Kennel cough outbreak - dogs are on antibiotics and do not &quot;look&quot; sick.</td>
<td></td>
</tr>
</tbody>
</table>

![Signature](signature.png)

**Date:** 10-10-07  
**Time:** 1:30 P.M.

**Inspector’s Signature:**  
**Owner/Authorized Agent’s Signature:**

AW-2  
Rev. 1/07  
White - Office  
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PAGE ____ OF ____