**ANIMAL WELFARE INSPECTION**

**BUSINESS NAME:** Nash County Animal Shelter  
**OWNER:** Nash County  
**ADDRESS:** 921 First St  
**TELEPHONE:** (919) 957-9855  
**VMO:**  
**COUNTY:** Nash  
**TYPE FACILITY:** Animal Shelter  
**Number of Primary Enclosures:** 16  
**Animals Present:** Dogs 17  
**Cats:** 4

**Inspector:** Mark “X” in box, if adequate. Circle item number, if inadequate. Use NA if not applicable

<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>6.</td>
<td>Water Drainage</td>
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<tr>
<td>11.</td>
<td>Waste Disposal</td>
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<td>12.</td>
<td>Odor</td>
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<tr>
<td>13.</td>
<td>Ceiling, Wall, Floors</td>
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<tr>
<td>14.</td>
<td>Primary Enclosures</td>
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<tr>
<td>15.</td>
<td>Equipment &amp; Supplies</td>
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<td>16.</td>
<td>Washrooms, Sinks, Basins</td>
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<td>17.</td>
<td>Insect/Vermin Control</td>
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<td>18.</td>
<td>Building &amp; Grounds</td>
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<td>19.</td>
<td>Adequate Feed/Water</td>
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<td>20.</td>
<td>Food Storage</td>
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<td>21.</td>
<td>Personnel</td>
<td></td>
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<tr>
<td>22.</td>
<td>Animals’ Appearance</td>
<td></td>
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</tbody>
</table>

**SPECIAL ITEMS**

- Records
- Description of Animals
- Records/Vet Treatment
- Origin/Disposition
- Signature (boarding kennel)
- Transportation
- Care in Transit Discussed
- Veterinary Care
- Isolation Facility
- No Signs of Illness/Treated

**STRUCTURE**

- Housing Facilities
- Structure & Repair
- Ventilation & Temp.
- Lighting
- Ceiling, Wall, Floors
- Storage
- Water Drainage

**SANITATION**

- Records
- Odor
- Ceiling, Wall, Floors
- Primary Enclosures
- Equipment & Supplies
- Washrooms, Sinks, Basins
- Insect/Vermin Control
- Building & Grounds
- Adequate Feed/Water
- Food Storage
- Personnel
- Animals’ Appearance

**HUSBANDRY**

- Structure & Repair
- Space
- Ventilation & Temp.
- Adequate Shelter

**Primary Enclosures**

- Need to Seal Cracks in concrete in kennel
- Need to replace old water for cleaning area in kennel
- Need to secure doors better
- Need to provide properplay area
- Co should be well within compliance
- Located down gravel road

**APPROVED**

**DISAPPROVED**  
Date: 6/12/06  
Time: 8:30AM

**Veterinarian:** Dr. Coate  
Telephone: (919) 907-1616

**Inspector’s Signature**

**Owner/Authorized Agent’s Signature**

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**AW-2**  
Rev. 2/05  
White= Office  
Canary= Inspector  
Pink= Owner