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: 34°21.551 W: 77°8.0570

LICENSE #: 60
TYPE FACILITY: Animal Shelter (Private/Public) Boarding Kennel □ Pet Shop □ Public Auction □
BUSINESS NAME: Town of Wrightsville Beach
OWNER: Town of Wrightsville Beach
ADDRESS: 321 Causeway Dr, Wrightsville Beach, NC 28480
TELEPHONE: (910) 256-7945 Ext 410
VMO Shelley
COUNTY New Hanover

Number of Primary Enclosures 8 Animals Present: Dogs 0 Cats 0

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
24. Description of Animals
25. Records/Vet Treatment
26. Origin/Disposition
27. Signature (boarding kennel)
28. 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

29. Care in Transit Discussed

VETERINARY CARE

30. Isolation Facility
31. No Signs of Illness/Treated

APPROVED □ CONDITIONALLY APPROVED □ DISAPPROVED

Inspector's Signature

Owner/Authorized Agent's Signature

Date: 9/24/19 Time: 3:30 pm
**ANIMAL WELFARE INSPECTION CONTINUATION PAGE**

**LICENSE #:** 60  
**TYPE FACILITY:** Animal Shelter (Private/Not For Profit)  
**BOARDING KENNEL**  
**PET SHOP**  
**PUBLIC AUCTION**  
**BUSINESS NAME:** Town of Wrightsville Beach  
**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></td>
<td>All items in compliance today.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Noted that vet does all euthanasia for this shelter.</td>
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</tbody>
</table>

☑ APPROVED  ☐ CONDITIONALLY APPROVED  ☐ DISAPPROVED  

**Inspector's Signature**

**Owner/Authorized Agent's Signature**

AW-2  
Rev. 1/07