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: 34.24624 W: 77.87955

LICENSE #: 10450
TYPE FACILITY: Animal Shelter (Private/Public) ☑ Pet Shop □ Public Auction □
BUSINESS NAME: Petsmart #417
OWNER: Petsmart Corp.
ADDRESS: 4710 E New Center Dr, Wilmington, NC 28403
TELEPHONE: (910) 453-4422
VMO: Shelter
COUNTY: New Hanover

Number of Primary Enclosures 15 Animals Present: Dogs 0 Cats 29

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
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
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

Date 8-19-08 Time: 10:00 AM
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 #: 10450**
**TYPE FACILITY:** Animal Shelter (Private/Public)  □ Boarding Kennel  ✕ Pet Shop  □ Public Auction  □
**BUSINESS NAME:** Petsmart #417  
**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>Follow-up from 7-29-08</td>
<td>Today Records of origin are available for inspection. Met with Anita of CAT and discussed the need to get the control numbers if cats come from any animal control facility and as accurate a description as possible as to where the cat came from if a stray.</td>
<td></td>
</tr>
</tbody>
</table>

No signs of illness noted, clean and feeding on go at time of inspection.

**APPROVED**  □ CONDITIONALLY APPROVED  □ DISAPPROVED  

**Owner/Authorized Agent’s Signature**  

**Inspector’s Signature**

8-19-08  10:04 AM

AW-2  
Rev. 1/07  
White= Office  
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