Type of Inspection
New ☐ _____
Annual ☒ _____
Follow-Up _____
(Prev. Inspection Date)
Complaint ☐ _____
Courtesy ☐ _____
Random ☐ _____

NCDA&CS, VETERINARY DIVISION
ANIMAL WELFARE SECTION
1030 MAIL SERVICE CENTER,
RALEIGH, NC 27699-1030
PHONE: 919/715-7111, FAX: 919/733-6431

INDOOR ☐
OUTDOOR ☐
BOTH ☒

ENTERED 8-3-09

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 34.31500 **W:** 77.87622

LICENSE #: 10592
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☒ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Pets Pal Inn
OWNER: Christine Ponton
ADDRESS: 3417 Merchant Court, Wilmington, NC 28405
TELEPHONE: (910) 452-2424
VMO Stoler
COUNTY New Hanover

Number of Primary Enclosures 89 **Animals Present: Dogs** 44 **Cats** 1

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
☒ 9. Ventilation & Temp.
☒ 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

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

Transportation
☒ 29. Care in Transit Discussed

Veterinary Care
☒ 30. Isolation Facility
☒ 31. No Signs of Illness/ Treated

☒ **APPROVED** ☐ **CONDITIONALLY APPROVED** ☐ **DISAPPROVED** Date 8-3-09 Time: 11:00 AM

Ralph Stoler
Inspector's Signature

Christine Ponton
Owner/Authorized Agent's Signature

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

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ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: 10592
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☒ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Pets Pal Inn
OWNER:
ADDRESS:
TELEPHONE: (_____) _____-_____

Cont.

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
	Comments:	
	Temperature is in range in all areas of the facility.	
	Reviewed medical log and discussed with owner the need to have the strenght of the medicine on hand either by bottle or owner's records.	
	Exercise yards have good grass and are in good shape.	
	Owner has started using the quarentine room for housing any boarders that are recouperating from surgery or other procedures that require a quite environment. Advised owner to only use cross contamination barriers that are impervious to moisture.	
	Advised owner to be pro-active in addressing any doors or kennel material that has begining rust to show.	

☒ APPROVED ☐ CONDITIONALLY APPROVED ☐ DISAPPROVED Date: 8-3-09 Time: 11:00Am

Inspector's Signature

Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

White= Office Canary= Inspector Pink= Owner