ANIMAL WELFARE INSPECTION

BUSINESS NAME: Town of Woodland
OWNER: Town of Woodland
ADDRESS: 300 Saunooke St, Woodland NC 27797
TELEPHONE: (336) 587-7161
COUNTY: Caswell
TYPE FACILITY: Animal Shelter √ Boarding Kennel □ Dealer □ Pet Shop □ Public Auction □
Number of Primary Enclosures 4 Animals Present: Dogs 0 Cats 0

Inspector: Mark “X” in box, if adequate. Circle 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

HUSBANDRY
☐ 19. Adequate Feed/Water
☐ 20. Food Storage
☐ 21. Personnel
☐ 22. Animals’ Appearance

SPECIAL ITEMS
Records
☐ 23. Description of Animals
☐ 24. Records/Vet Treatment
☐ 25. Origin/Disposition
☐ 26. Signature (boarding kennel)

Transportation
☐ 27. Care in Transit Discussed

Veterinary Care
☐ 28. Isolation Facility
☐ 29. No Signs of Illness/Treated

Item Number Explanation of Inadequacy (circled items above) And Recommendation For Compliance Date Corrections Must Be Completed

☐ 4. Pens located behind storage barn. Plastic used for food/water.
☐ 55. Yellow plastic hampers used for dog houses. Grass flooring. No water. No top dawn pens. No washroom. No ceiling or floors. No animals. No veterinary care.

☐ APPROVED ☐ DISAPPROVED Date: 10/17/06 Time: 10:15p

Veterinarian: Telephone: (______) ______

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