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: 36.49675 W: 77.44193

LICENSE #: 116
TYPE FACILITY: Animal Shelter (Private/Public) ☑ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Northampton Co Animal Shelter
OWNER: Northampton Co Government
ADDRESS: 9495 NC Hwy 365, Jackson, NC
TELEPHONE: (336) 534-8941
VMO Northampton
COUNTY Northampton

Number of Primary Enclosures: 5 Animals Present: Dogs: 5 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

Record
☒ 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

☑ APPROVED ☐ CONDITIONALLY APPROVED ☐ DISAPPROVED

Inspector’s Signature: [Signature]

Date: 11/15/20 MD
Time: 15:10

Owner/Authorized Agent’s Signature: [Signature]

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

PAGE 1 OF 2
**ANIMAL WELFARE INSPECTION CONTINUATION PAGE**

**LICENSE #:** 115

**TYPE FACILITY:** Animal Shelter (Private/Public) ☒ Boarding Kennel □ Pet Shop □ Public Auction □

**BUSINESS NAME:** Northampton Co Animal Shelter

**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>I performed an Euthanasia inspection on 10/12/09. I observed a practicality that date and it was acceptable.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>The manual was not completed on 10/12/09. I re-checked the manual today and it is now completed.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>The shelter was very clean on today's inspection.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Keep up the good work.</td>
<td></td>
</tr>
</tbody>
</table>

**APPROVED** ☑ **CONDITIONALLY APPROVED** □ **DISAPPROVED** □

Date: 10/12/09 Time: 12:00

**Inspector’s Signature**

**Owner/Authorized Agent’s Signature**