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: 34.74611 W: 77.38770

LICENSE #: 10493
TYPE FACILITY: Animal Shelter (Private/Public) ☑ Boarding Kennel ☑ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Town & Country Pet Center
OWNER: Barry Sanders
ADDRESS: 850 Bell Fork Rd., Jacksonville, NC 28556
TELEPHONE: (910) 455-5331
VMO: Sholar
COUNTY: Onslow

Number of Primary Enclosures: 6-3 Animals Present: Dogs 9 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 ☑

APPROVED ☑ CONDITIONALLY APPROVED ☐ DISAPPROVED ☐

Date: 9/15/09 Time: 11:45 AM

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

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

PAGE 1 OF 2
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TYPE FACILITY: Animal Shelter (Private/Public) ☑ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Town & Country Pet Center
OWNER: [Signature]
ADDRESS: [Address]
TELEPHONE: [Phone Number]

<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>Comments.</td>
<td>Owner is replacing the older, lighter weight chain link wire with heavier gauge wire which should be less maintenance.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Temperature was 76° at 11:00 AM in the Kennel rooms.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Discussed the staining paint on the Kennel floors. Owner plans to repaint after the holidays.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Discussed owner adding the strength of all prescription medications on the medical log.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Remember to scoop poop in exercise yards at least twice a day.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Odors were much better in the facility today.</td>
<td></td>
</tr>
</tbody>
</table>

☑ APPROVED ☐ CONDITIONALLY APPROVED ☐ DISAPPROVED
Date: 9/15/09 Time: 11:45 AM

Inspector’s Signature
Owner/Authorized Agent’s Signature

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