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: 34.785.78 W: 77.40351

LICENSE #: 10494
TYPE FACILITY: Animal Shelter (Private/Public) ☑ Boarding Kennel ☑ Pet Shop ☑ Public Auction ☑
BUSINESS NAME: Pet Mart # 416
OWNER: Pet Mart Corp.
ADDRESS: 1335 Westerly Blvd, Sax, NC 28574
TELEPHONE: (910) 938-3410
VMO Sheer
COUNTY Onslow

Number of Primary Enclosures 10 Animals Present: Dogs 0 Cats 13

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

Transportation

☐ 29. Care in Transit Discussed

Veterinary Care

☐ 30. Isolation Facility
☐ 31. No Signs of Illness/Treated

☐ APPROVED ☐ CONDITIONALLY APPROVED ☒ DISAPPROVED

Date: 7.24.08 Time: 1:15 pm

Inspector’s Signature

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 #: 10494

**TYPE FACILITY:** Animal Shelter (Private/Public)  
- Boarding Kennel  
- Pet Shop  
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**BUSINESS NAME:**  
- [Redacted]

**OWNER:**  
- [Redacted]

**ADDRESS:**  
- [Redacted]

**TELEPHONE:** (_____) ______

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**Item Number** | **Explanation of Inadequacy (circled items above) And Recommendation For Compliance** | **Date Corrections Must Be Completed**
---|---|---
12 | Litter box odors are strong. Not all boxes are full - need to pay more attention to scrubbing litter boxes/pans. |  
13 | More attention to cleaning is needed underneath the bank of cat cages. Top or cage need cleaning also. |  
26 | Records of Origin - Cats - none of the 6 Cats had any records of Origin on site. TopCat - 2 out of 7 Cats had records of Origin on site. - All Cats must have their record of origin on site for inspection. |  

Re-Inspect in 2 weeks.

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<table>
<thead>
<tr>
<th>APPROVED</th>
<th>CONDITIONALLY APPROVED</th>
<th>DISAPPROVED</th>
<th>Date: 7-24-08</th>
<th>Time: 1:15 pm</th>
</tr>
</thead>
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