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° 7'30" W: 77° 38'9"10"

LICENSE #: 10320
TYPE FACILITY: Animal Shelter (Private/Public) ☒ Boarding Kennel ☒ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Animal House
OWNER: Julie Neidelberg
ADDRESS: 655 Bell Fork Rd., Jox., NC 28540
TELEPHONE: (910) 353-2684
VMO Shool
COUNTY Onslow

Number of Primary Enclosures 250 Animals Present: Dogs 103 Cats 11

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

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

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)

Transportation

29. Care in Transit Discussed

Veterinary Care

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

☑ APPROVED ☐ CONDITIONALLY APPROVED ☐ DISAPPROVED

Date 3-6-08 Time: 11:30 AM

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 #: 10320
TYPE FACILITY: Animal Shelter (Private/Public) □ Boarding Kennel □ Pet Shop □ Public Auction □
BUSINESS NAME: Animal House
OWNER:
ADDRESS: [redacted]
TELEPHONE: [redacted]

<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>1) Building C - Glass in the door is broken. Should be repaired this week.</td>
<td></td>
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<tr>
<td>7) Building D - 3rd Outdoor pen - Chain link has a hole that needs to be repaired.</td>
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<tr>
<td>7) Outdoor Exercise yards - Need to maintain grass in some areas - discussed w/manger to keep any holes filled and not to have any bare dirt areas.</td>
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<tr>
<td>3) Building C - 3 sets of lights are out.</td>
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</tbody>
</table>

Comments:

Discussed removing the scratching posts in the cat room. Manger stated the owner is going to start replacing pipes that are breaking to rest and the Panther doors will be replaced w/glass doors. Some areas have some chipped paint - owner is aware and plans to repaint.
Temperature is 72°-74° in all buildings, day care is in compliance with ratio.
Remember to log the straight of the medication on the med log.

Today's inspection is conditionally approved contingent upon the above items being addressed. Re-inspect in 30 days.

☐ APPROVED  ❌ CONDITIONALLY APPROVED  ☐ DISAPPROVED

Inspector's Signature: [redacted]  Owner/Authorized Agent's Signature: [redacted]  Date: 4/8  Time: 11:30 AM

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

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