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: 25 98775 W: 77 06429

LICENSE #: 103 2
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☑ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Green Valley Farm
OWNER: C. J. Jones
ADDRESS: 6416 Alexander Dr, Chapel Hill, NC
TELEPHONE: (919) 967-9048
VMO: 06/01/07
COUNTY: Orange

Number of Primary Enclosures: 60
Animals Present: Dogs 0, 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. 70°
☐ 3. Lighting
☐ 4. Ceiling, Wall, Floors
☐ 5. Storage
☐ 6. Water Drainage

Primary Enclosures
☐ 7. Structure & Repair
☐ 8. Space
☐ 9. Ventilation & Temp. 50°
☐ 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. Ratio of 1:10 personnel to animals if >4 in primary enclosure or common area
☐ 23. Animals’ Appearance

SPECIAL ITEMS

Records
☐ 23. Description of Animals
☐ 24. Records/Vet Treatment
☐ 25. Origin/Disposition
☐ 26. Signature (boarding kennel)
☐ 27. Written permission from owner for commingling (doggie daycare)

Transportation
☐ 28. Care in Transit Discussed

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

☑ APPROVED ☐ DISAPPROVED

Date: 10/9/07 Time: 7:40 AM

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

AW-2
Rev. 1/07

White= Office
Canary= Inspector
Pink= Owner

PAGE 1 OF 2
ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: 10328
TYPE FACILITY: Animal Shelter (Private/Public) □ Boarding Kennel ☑ Pet Shop □ Public Auction □
BUSINESS NAME: Green Valley Farms
OWNER: Cindy Ezers
ADDRESS: 6416 Alexander Dr, Chapel Hill, NC
TELEPHONE: (919) 967-9048

Item Number | Explanation of Inadequacy (circled items above) And Recommendation For Compliance | Date Corrections Must Be Completed
---|---|---
| | I performed a follow-up inspection on today’s date. | |

Some of the deficiencies on 9/4/07, follow-up inspection have been addressed. However, there are still deficiencies that need addressing:

1) The ceiling still needs cleaning (cobwebs)
2) The wood in the cages needs to be removed.
3) The concrete in the kennels needs resurfacing. There are some sharp edges around the concrete blocks that need to be fixed.
4) The wires on the kennel gates need repair.
5) The play yard outside needs gravel.
6) The medication log needs to have initials put on the medication sheets.

I will return in 60 days to perform a re-check.

☑ APPROVED ☐ DISAPPROVED

DATE: 10/9/07 TIME: 9:50 a.m.

Inspector’s Signature

Owner/Authorized Agent’s Signature

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