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: 35°9′17.5″ W: 79°0′6.4″

LICENSE #: 10323
TYPE FACILITY: Animal Shelter (Private/Public)   Boarding Kennel   Pet Shop   Public Auction
BUSINESS NAME: Green Valley Farms
OWNER:        
ADDRESS: 6416 Alexander Dr, Chapel Hill, NC
TELEPHONE: 919-967-4948
VMO Hunter
COUNTY Orange

Number of Primary Enclosures 60   Animals Present: Dogs 4   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. 80°   
3. Lighting   
4. Ceiling, Wall, Floors      
5. Storage   
6. Water Drainage

Primary Enclosures
7. Structure & Repair
8. Space
9. Ventilation & Temp. 80°
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: 7/29/07 Time: 2:00pm

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 #: 10378
TYPE FACILITY: Animal Shelter (Private/Public) ☒ Boarding Kennel □ Pet Shop □ Public Auction □
BUSINESS NAME: Greger Valley Farms
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>#1</td>
<td>I conducted an annual inspection today. The majority of dogs housed belong to Ms. Reiger.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>There were 4 dogs being housed. The needles on each hound were good.</td>
<td></td>
</tr>
<tr>
<td>#17</td>
<td>The staff needs to make sure the cages are clean and free of waste.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>The yard needs to be cleaned and any droppings removed.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>The food was in sealed containers.</td>
<td></td>
</tr>
<tr>
<td>#18</td>
<td>The yards in the common area need more gravel.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>I am conditionally approving this facility today. The owner will make an effort to</td>
<td></td>
</tr>
<tr>
<td></td>
<td>ensure the facility is in compliance.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>I will perform a follow-up on this facility.</td>
<td></td>
</tr>
</tbody>
</table>

□ APPROVED ☒ CONDITIONALLY APPROVED □ DISAPPROVED  Date: 7/14/07  Time: 1:50 PM

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

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