ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 34.41178  W: 77.61046

LICENSE #: 84
TYPE FACILITY: Animal Shelter (Private/Public)  Boarding Kennel  Pet Shop  Public Auction
BUSINESS NAME: Topsail Humane Society
OWNER: Kathy Lewis
ADDRESS: 117 Lewis Rd, Nags Head, NC 27959
TELEPHONE: (910) 270-2543
VMO  Sholar
COUNTY  Perdue

Number of Primary Enclosures 37  Animals Present: Dogs 24  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

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
N/A

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

Inspector's Signature

Owner/Authorized Agent's Signature

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

PAGE 1 OF 2
LICENSE #: 84
TYPE FACILITY: Animal Shelter (Private/Public) ☑ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: TOPSOIL H.S.
OWNER:
ADDRESS: ____________________________
TELEPHONE: _______ Cont. _______

<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></td>
<td>30 day follow-up from 4.13.09</td>
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1. Additional ground has been installed at the new set of outdoor kennels. There now is a 24" border of ground around the pens.
2. Owner stated feces were being scooped twice a day now.
3. Records of origin are more complete today.

Items to be addressed:
18. Grounds - Old outside kennels - shelter needs to keep the grass mowed short in order that the hay and feces may be better identified and kept clean. There is not a drainage problem found today.
20. Isolation Area - Owner has designated an upstairs room for isolation. There is carpet on the floor. Owner stated she would cover the carpet with plastic. Advised her this would not be adequate. Owner stated she had a sufficient number of foster homes that isolation could be handled in that manner.

Comments:
There were no signs of illness noted today.
Owner needs to replace damaged dog houses as needed.
Continue to maintain complete records on each animal.

☑ APPROVED ☐ CONDITIONALLY APPROVED ☐ DISAPPROVED

5.21.09  Time: 2:00 PM

Inspector's Signature

Owner/Authorized Agent's Signature

AW-2
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