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°54'7" W: 77°24'21.5"

LICENSE #: 10715
TYPE FACILITY: Animal Shelter (Private/Public) □ Boarding Kennel □ Pet Shop □ Public Auction □
BUSINESS NAME: E&B Boarding
OWNER: Barrett Emily
ADDRESS: 3729 570 C. Contway Rd Greenville NC 27858
TELEPHONE: (252) 531-7057
VMO: Pam Williams
COUNTY: Pitt

Number of Primary Enclosures: 20  Animals Present: Dogs 10  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

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
☑ 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: 1/14/08  Time: 9:50 a.m.

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 #: 10715
TYPE FACILITY: Animal Shelter (Private/Public) ☒ Boarding Kennel ☒ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: E.B. Boarding
OWNER: Barrett, Emily Jarvis
ADDRESS: 3729 T.C. Galloway Rd Greenville, NC 27858
TELEPHONE: (252) 531 - 7057

<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>I performed an annual inspection today.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>#18. Need to either plant grass, gravel down, or concrete in the play area; were dogs run back and forth along the fence line.</td>
<td></td>
<td></td>
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<tr>
<td>#25. Need to start medication treatment sheets, put date, time, amount, and initial of person giving medication.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>#27. Need to start signing sign out sheet for persons boarding an animal care.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>These items need to be addressed within 45 days.</td>
<td></td>
<td></td>
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</tbody>
</table>

I received a phone call from Mr. Jarvis and he advised #25, and #27 have been completed.

Reference #18 that will be addressed within 45 days.

Mr. Jarvis contacted me on 1/15/08.

APPROVED ☒ CONDITIONALLY APPROVED ☐ DISAPPROVED

Inspector's Signature

Owner's Signature

Date: 1/29/08 Time: 9:45 AM

White= Office
Canary= Inspector
Pink= Owner

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