

Type of Inspection
 New _____
 Annual _____
 Follow-Up 9-18-08
 (Prev. Inspection Date)
 Complaint _____
 Courtesy _____
 Random _____

NCDA&CS, VETERINARY DIVISION
 ANIMAL WELFARE SECTION
 1030 MAIL SERVICE CENTER,
 RALEIGH, NC 27699-1030
 PHONE: 919/715-7111, FAX: 919/733-6431

INDOOR
 OUTDOOR
 BOTH

ENTERED
 10-3-08

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 34.62590 W: 78.99501

LICENSE #: 103
 TYPE FACILITY: Animal Shelter (Private/Public) Boarding Kennel Pet Shop Public Auction
 BUSINESS NAME: City of Lumberton
 OWNER: City of Lumberton
 ADDRESS: P.O. Box 1051 103 Godwin Ave., Lumberton, NC 28359
 TELEPHONE: (910) 671-3845
 VMO Sholar
 COUNTY Robeson

Number of Primary Enclosures 2 Kennel Animals Present: Dogs 0 Cats 1

Inspector: Mark "X" in each box, if adequate.
 Circle each item number, if inadequate.
 Use NA if not applicable

- | STRUCTURE | SANITATION | SPECIAL ITEMS |
|--|---|---|
| <u>Housing Facilities</u> | | <u>Records</u> |
| <input checked="" type="checkbox"/> 1. Structure & Repair | <input checked="" type="checkbox"/> 11. Waste Disposal | <input checked="" type="checkbox"/> 24. Description of Animals |
| <input checked="" type="checkbox"/> 2. Ventilation & Temp. | <input checked="" type="checkbox"/> 12. Odor | <input checked="" type="checkbox"/> 25. Records/Vet Treatment |
| <input checked="" type="checkbox"/> 3. Lighting | <input checked="" type="checkbox"/> 13. Ceiling, Wall, Floors | <input checked="" type="checkbox"/> 26. Origin/Disposition |
| <input checked="" type="checkbox"/> 4. Ceiling, Wall, Floors | <input checked="" type="checkbox"/> 14. Primary Enclosures | <input type="checkbox"/> 27. Signature (boarding kennel) |
| <input checked="" type="checkbox"/> 5. Storage | <input checked="" type="checkbox"/> 15. Equipment & Supplies <u>NIA</u> | <input type="checkbox"/> 28. Written permission from owner for commingling (doggie daycare) |
| <input checked="" type="checkbox"/> 6. Water Drainage | <input checked="" type="checkbox"/> 16. Washrooms, Sinks, Basins | |
| | <input checked="" type="checkbox"/> 17. Insect/Vermin Control | |
| | <input checked="" type="checkbox"/> 18. Building & Grounds | |
| <u>Primary Enclosures</u> | <u>HUSBANDRY</u> | <u>Transportation</u> |
| <input checked="" type="checkbox"/> 7. Structure & Repair | <input checked="" type="checkbox"/> 19. Adequate Feed/Water | <input type="checkbox"/> 29. Care in Transit Discussed |
| <input checked="" type="checkbox"/> 8. Space | <input type="checkbox"/> 20. Food Storage | |
| <input checked="" type="checkbox"/> 9. Ventilation & Temp. | <input checked="" type="checkbox"/> 21. Personnel | <u>Veterinary Care</u> <u>NIA - Holding Site</u> |
| <input checked="" type="checkbox"/> 10. Adequate Shelter | <input type="checkbox"/> 22. Ratio of 1:10 personnel to animals if >4 in primary enclosure or common area | <input type="checkbox"/> 30. Isolation Facility |
| | <u>NIA</u> | <input checked="" type="checkbox"/> 31. No Signs of Illness/Treated |
| | <input checked="" type="checkbox"/> 23. Animals' Appearance | |

APPROVED CONDITIONALLY APPROVED DISAPPROVED Date: 10-1-08 Time: 12:00pm

Patricia Sholar Inspector's Signature John M. Price 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

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TYPE FACILITY: Animal Shelter (Private Public) Boarding Kennel Pet Shop Public Auction

BUSINESS NAME: City of Lumberton

OWNER: _____

ADDRESS: _____

TELEPHONE: () - () Conty

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
	<u>Follow-up from 9-18-08</u>	
1-	<u>Drain at dog pens has been cleaned out and now has a gravel base for a drain field.</u>	
2-	<u>Wire patrol - wire has been repaired.</u>	
3-	<u>Cat cage has been cleaned.</u>	
2)	<u>Food Storage can is going to be replaced - hole in lid. Discussed food storage w/ACO John Moore.</u>	
	<u>No dogs today. Pens are clean.</u>	

APPROVED CONDITIONALLY APPROVED DISAPPROVED Date: 10-1-08 Time: 12:00pm

Patricia Shelton
Inspector's Signature

John Moore
Owner/Authorized Agent's Signature

AW-2 White= Office Canary= Inspector Pink= Owner