

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

| | |
|---------|-------------------------------------|
| INDOOR | <input type="checkbox"/> |
| OUTDOOR | <input checked="" type="checkbox"/> |
| BOTH | <input type="checkbox"/> |

| Type of Inspection | |
|-------------------------------|-------------------------------------|
| New | <input checked="" type="checkbox"/> |
| Annual | <input type="checkbox"/> |
| Follow-Up | <input type="checkbox"/> |
| (Prev. Inspection Date) _____ | |
| Complaint | <input type="checkbox"/> |
| Courtesy | <input type="checkbox"/> |
| Random | <input type="checkbox"/> |

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 34.54247 W: 79.29400

LICENSE #: _____
 TYPE FACILITY: Animal Shelter (Private/Public) Boarding Kennel Pet Shop Public Auction
 BUSINESS NAME: Town of Rowland
 OWNER: Town of Rowland
 ADDRESS: P.O. Box 127, Rowland, NC 28383, 462 Canal St.
 TELEPHONE: (910) 422-3311
 VMO: Sholar
 COUNTY: Robeson

Number of Primary Enclosures 6 K-9 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.
 - 3. Lighting
 - 4. Ceiling, Wall, Floors
 - 5. Storage
 - 6. Water Drainage

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)

Primary Enclosures

- 7. Structure & Repair
- 8. Space
- 9. Ventilation & Temp.
- 10. Adequate Shelter

- 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: 10/23/08 Time: 2:00 PM

P. M. Sholar
 Inspector's Signature

Chief John M. Keenan
 Owner/Authorized Agent's Signature

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

