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°31'8" W: 81°45'05"

LICENSE #: 45
TYPE FACILITY: Animal Shelter (Private/Public) ☑ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: KUTHERFORD CO. ANIMAL SHELTER
OWNER: SHERIFF'S DEPT
ADDRESS: 576 LAUREL HILL DRIVE KUTHERFORDON
TELEPHONE: (828) 287-6025
VMO KUTHERFORD
COUNTY KUTHERFORD

Number of Primary Enclosures 34 Animals Present: Dogs 25 Cats 25

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
1. Waste Disposal ☑
2. Odor ☑
3. Ceiling, Wall, Floors ☑
4. Primary Enclosures ☑
5. Equipment & Supplies ☑
6. Washrooms, Sinks, Basins ☑
7. Insect/Vermin Control ☑
8. 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. 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: 09/06/08 Time: 09:21

Inspector’s Signature

Owner/Authorized Agent’s Signature
### ANIMAL WELFARE INSPECTION CONTINUATION PAGE

**LICENSE #:** 65  
**TYPE FACILITY:** Animal Shelter (Private/Public)  
**BUSINESS NAME:** Rutherford Co  
**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>0</td>
<td>Door leading to outside at rear of bite house and back door of main kennel are damaged and rusted through allowing entrance of wildlife or other animals and escape of smaller animals from shelter - exposing small ends and making sanitation difficult.</td>
<td>30 days</td>
</tr>
<tr>
<td>86</td>
<td>Some disposition paperwork, an RTO, is missing owner information.</td>
<td>Make sure all information is complete.</td>
</tr>
<tr>
<td>1</td>
<td>Kennels and Kennel area have been recently repainted, however the paint is not withstanding pressure washing and chemicals used to sanitize - Repaint / Reseal as needed.</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Evidence of rodents in bite house - establish and maintain an effective program for control of rodents.</td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>One litter receptacle / every 30 days</td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>19 cats in cat run - No more than 19 cats per enclosure - Also do not house unrelated kittens with unrelated adults.</td>
<td></td>
</tr>
</tbody>
</table>

☐ APPROVED  ☐ CONDITIONALLY APPROVED  ☐ DISAPPROVED  

**Date:** 10/28  
**Time:** 09:21

**Inspector’s Signature:**  
**Owner/Authorized Agent’s Signature:**

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