<table>
<thead>
<tr>
<th>Name of business</th>
<th>Sampson County Animal Control &amp; Pet Adoption</th>
</tr>
</thead>
<tbody>
<tr>
<td>City</td>
<td>Clinton</td>
</tr>
</tbody>
</table>

| License number (if currently licensed) | 81  |
| license type                  | 44  |

- Prepare animals for euthanasia: Acceptable
- Properly record all data: Acceptable
- Security, controlled substances: Acceptable
- Supervise Prob. CET: N/A
- Properly euthanize: Acceptable
- Properly dispose of dead: Acceptable
- IC only on anesth. or sedated: N/A

<table>
<thead>
<tr>
<th>Use only bottled gas</th>
<th>Acceptable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Use only comm. mfd chamber</td>
<td>Acceptable</td>
</tr>
<tr>
<td>Only same species in chamber</td>
<td>Acceptable</td>
</tr>
<tr>
<td>In chamber for &gt;= 20 min.</td>
<td>Acceptable</td>
</tr>
</tbody>
</table>

- Not used on < 16 weeks: Acceptable
- Not used on pregnant: Acceptable
- Not used on near death: Acceptable
- No live with dead: Acceptable
- Animals separated: Acceptable
- At least 1 viewport: Acceptable
- Chamber in good order: Acceptable
- Airtight seals present: N/A

- Light shatterproof: N/A
- Chamber sufficiently lit: Acceptable
- Electrical explosion-proof: Acceptable
- If inside, two CO monitors: N/A

- Records of monthly inspection: Unacceptable
- Records of yearly inspection: Unacceptable
- Visual inspection by AWS: Acceptable

- Chamber cleaned b/t uses: Acceptable
- Operational guide & or manual: Acceptable
- >= 2 adults present when used: Acceptable

- Reports of extraordinary euth: N/A

<table>
<thead>
<tr>
<th>Current copy of AWA in manual</th>
<th>Acceptable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current AVMA euth. in manual</td>
<td>Acceptable</td>
</tr>
<tr>
<td>Current HSUS euth. in manual</td>
<td>Acceptable</td>
</tr>
<tr>
<td>Current AHA euth. in manual</td>
<td>Acceptable</td>
</tr>
</tbody>
</table>

- List of approved euth. methods: Acceptable
- List of CETs & methods: Acceptable
- Contact info for DVM in PVC: Acceptable
- Contact info for DVM care: Acceptable
- List after hour euth. meth.: Acceptable
- Euth. methods if no CET present: Acceptable
- Policy for verifying death: Acceptable
- Contact info for suppliers: Acceptable
- DEA certificate: N/A
- MSDS sheets, chemical or gas: Acceptable
- MSDS sheets, transp. or anesth.: Acceptable
- Signs & symptoms, human: Acceptable
- First aid information: Acceptable
- MD contact information: Acceptable

<table>
<thead>
<tr>
<th>Signature of inspector</th>
<th>Jamie Steele</th>
</tr>
</thead>
<tbody>
<tr>
<td>date</td>
<td>9/25/09</td>
</tr>
</tbody>
</table>

| Signature of management      | Christine Kelly |
**ANIMAL WELFARE INSPECTION CONTINUATION PAGE**

**LICENSE #:** 81
**TYPE FACILITY:** Animal Shelter (Private/Public)  
Boarding Kennel  
Pet Shop  
Public Auction  
**BUSINESS NAME:** Sampson Co. AC
**OWNER:**  
**ADDRESS:** Cont.
**TELEPHONE:** (____) _______

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Explanation of Inadequacy (circed items above) And Recommendation For Compliance</th>
<th>Date Corrections Must Be Completed</th>
</tr>
</thead>
</table>

- **Euth. By Co. 0605** - See attached list from Nany Naylor, Safety Inspector - items that need to be addressed on the CO Chamber.

  There were some past monthly inspections reports found and reviewed but no current reports were available. Ms. Gilberg, Shelter Manager stated Mr. Naylor did an inspection on 9/11/09 and normally mailed his report. As of today, the report was not available for my review.

  In order to receive "Acceptable" on 'Chamber in good order', the seals need to be replaced on the door and all the items on Mr. Naylor's list addressed.

  Sanitation around the outside of the chamber needs to be addressed, there was old feces found in the gravel around the chamber pad, suggest scooping and bagging feces rather than hosing the feces.

  Shelter needs to volunteer not use this chamber until all were addressed.

  Note the chamber was San in Aug '09 for repair and learned why no report was available and the Sept '09 report should be fixed by the shelter next week.

**APPROVED**  
**CONDITIONALLY APPROVED**  
**DISAPPROVED**  
**Date:** 9/25/09  
**Time:** 11:30 AM

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

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