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: 34.76520 W: 79.46770

LICENSE #: 10847
TYPE FACILITY: Animal Shelter (Private/Public) □  Boarding Kennel X  Pet Shop □  Public Auction □
BUSINESS NAME: Adam's Pet Spa
OWNER: Helen Nelson
ADDRESS: 1011 South Main St., Laurinburg, NC 28352
TELEPHONE: (910) 276-2443
VMO: Sholar
COUNTY: Scotland

Number of Primary Enclosures: 7  Animals Present: Dogs 1  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

SPECIAL ITEMS

Records
□ 24. Description of Animals
□ 25. Records/Vet Treatment
□ 26. Origin/Disposition
X 27. Signature (boarding kennel)
□ 28. Written permission from owner for commingling (doggie daycare)

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
X 23. Animals’ Appearance

APPROVED  □ CONDITIONALLY APPROVED  □ DISAPPROVED

Inspector’s Signature

Owner/Authorized Agent’s Signature

Date: 8-20-09  Time: 9:00 AM

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

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ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: 10847  
TYPE FACILITY: Animal Shelter (Private/Public) ☑ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐  
BUSINESS NAME: Adam's Pet Spa  
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>1.</td>
<td>Follow-up from 6-25-09. Items that have been addressed:</td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>1. Records - Owner has individual folders for each breeder and their papers.</td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>2. Owner is now using a Signature Release Form.</td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>3. Control logs are kept but records are not kept for boarding.</td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>4. The remainder of the showerboard has been installed.</td>
<td></td>
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<tr>
<td>6.</td>
<td>5. The ground has been paved in the exercise yard.</td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td>6. Owner has installed chain link gates in the exercise yard to prevent entrance</td>
<td></td>
</tr>
<tr>
<td>8.</td>
<td>or access to the storage building or the alley between the buildings.</td>
<td></td>
</tr>
<tr>
<td>9.</td>
<td>7. A closed off area has been created to store the country dry feed.</td>
<td></td>
</tr>
<tr>
<td>10.</td>
<td>8. No dogs are allowed access to the kitchen now.</td>
<td></td>
</tr>
<tr>
<td>11.</td>
<td>9. Owner has replanted the wood play set in the exercise yard with a plastic play set.</td>
<td></td>
</tr>
<tr>
<td>12.</td>
<td>10. All fencing in the exercise yard is now in compliance.</td>
<td></td>
</tr>
<tr>
<td>13.</td>
<td>Items to be addressed:</td>
<td></td>
</tr>
<tr>
<td>14.</td>
<td>1. Front, play room #1, isolation room, glass doors - Finish all moldings -</td>
<td></td>
</tr>
<tr>
<td>15.</td>
<td>2. Finish work even though it is out of dog's reach - 3 rooms; glass doors -</td>
<td></td>
</tr>
<tr>
<td>16.</td>
<td>3. Over wood in non-wood material.</td>
<td></td>
</tr>
</tbody>
</table>

Comments: 
- Discussed keeping facility in good repair - rooms painting any areas that need painting and just general up keep of building inside and outside. 
- Discussed sanitizing outdoor play yard - Reminded owner that she needs to consult her vet. For recommendation on what disinfectants to use. 
- Owner must remember all dogs and cats 4 months old must have proof of a current rabies vaccination. 
- Temperature was in range in all areas of facility. 
- Item #1 should be complete before next inspection.

☑ APPROVED  ☐ CONDITIONALLY APPROVED  ☐ DISAPPROVED  

Dated: 6-25-09  Time: 9:00 AM  

Inspector’s Signature:  
Canary= Inspector  
Owner/Authorized Agent’s Signature:  

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