ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 35.33411  W: 80.21408

LICENSE #: 71
TYPE FACILITY: Animal Shelter (Private/Public)  Boarding Kennel  Pet Shop  Public Auction
BUSINESS NAME: Stanley Co. Animal Shelter
OWNER: Stanley Co.
ADDRESS: 1037 S Copie Ave. Albermarle NC.
TELEPHONE: (704) 926-3283
VMO Hunter
COUNTY Stanley

Number of Primary Enclosures 102  Animals Present: Dogs 20  Cats 14

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

STRUCTURE

Housing Facilities

Primary Enclosures

SANITATION


HUSBANDRY


SPECIAL ITEMS

Records

Transportation
29. Care in Transit Discussed

Veterinary Care
30. Isolation Facility 31. No Signs of Illness/ Treated

APPROVED  □ DISAPPROVED

Date: 10-29-11  Time: 9:45am - 9:30am

Inspector’s Signature

Owner/Authorized Agent’s Signature

AW-2  Rev. 1/07  White= Office  Canary= Inspector  Pink= Owner  Scanned  Sent 10-29-11

PAGE 1 OF
Purpose of today’s inspection is to perform the Shelter’s annual euthanasia inspection & records inspection. The Shelter currently has (4) EBI’s. Shelter utilizes EBI only as their method of euthanasia. Currently, shelter contracts with a local vet to perform the majority of their euthanasia. All euthanasia was performed to AWA standards today & death was verified in an approved manner.

Facility:

4: reseal or repaint all areas that are chipping or rusted or cracked paint on the floors.

13: Several of the kennels here today have chipped paint along floors & walls, exposing bare concrete. Reseal or repaint all areas. Dog Kennel #14 - patch hole

No other inadequacies noted today.

APPROVED  DISAPPROVED  Date: 6-29-11  Time: 7:48AM - 9:30AM

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

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

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**Animal Welfare Section**  
**NC Department of Agriculture and Consumer Services**  
**1030 Mail Service Center**  
**Raleigh, NC 27699-1030**  

**Animal Welfare Section, NCDA&CS**  
**Euthanasia Inspection Report**

<table>
<thead>
<tr>
<th>Name of business</th>
<th>License number (if currently licensed)</th>
<th>License type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stanley Co. Animal Control</td>
<td>102</td>
<td>44</td>
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</tbody>
</table>

### Duties of a CET
- Prepare animals for euthanasia .0418  
  - **Acceptable**
- Properly record all data .0418  
  - **Acceptable**
- Security, controlled substances .0418  
  - **Acceptable**
- Supervise Prob. CET .0418  
  - **N/A**
- Properly euthanize .0418  
  - **Acceptable**
- Properly dispose of dead .0418  
  - **Acceptable**

### Euthanasia by Injection
- IC only on anesth. or sedated .0501  
  - **Not-viewed**

### Euthanasia by CO
- Use only bottled gas .0601  
- Use only comm. mfd chamber .0601  
- Only same species in chamber .0601  
- In chamber for >= 20 min. .0601
- Not used on < 16 weeks .0602
- Not used on pregnant .0602
- Not used on near death .0602
- No live with dead .0603
- Chamber separated .0604
- Chamber sufficiently lit .0605
- Electrical explosion-proof .0605
- Chamber in good order .0605
- Airtight seals present .0605
- Records of monthly inspection .0606
- Records of yearly inspection .0606
- Visual inspection by AWS
- Chamber cleaned bt uses .0607
- Operational guide & or manual .0608
- >= 2 adults present when used .0609
- Reports of extraordinary euth .0705  
  - **Acceptable**

### Policy and procedure manual
- Current copy of AWA in manual .0803  
  - **Acceptable**
- Current AVMA euth. in manual .0803  
  - **Acceptable**
- Current HSUS euth. in manual .0803  
  - **Acceptable**
- Current AHA euth. in manual .0803  
  - **Acceptable**
- List of approved euth. methods .0803  
  - **Acceptable**
- List of CETs & methods .0803  
  - **Acceptable**
- Euth. methods if no CET present 0803  
  - **Acceptable**
- Contact info for DVM in PVC .0803  
  - **Acceptable**
- Contact info for DVM care .0803  
  - **Acceptable**
- Contact info for suppliers .0803  
  - **Acceptable**
- DEA certificate .0803  
  - **Acceptable**
- MSDS sheets, chemical or gas .0803  
  - **Acceptable**
- MSDS sheets, tranq. or anesth. .0803  
  - **Acceptable**
- Signs & symptoms, human .0803  
  - **Acceptable**
- First aid information .0803  
  - **Acceptable**
- MD contact information .0803  
  - **Acceptable**

**Signature of inspector**  
**Signature of management**

**Date:** 06-29-11  
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