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: 36.25476  W: 78.32985

LICENSE #: 49
TYPE FACILITY: Animal Shelter (Private/Public) X Boarding Kennel □ Pet Shop □ Public Auction □
BUSINESS NAME: Vance Co. Animal Shelter
OWNER: Vance Co Government
ADDRESS: 165 Vance Ave, New Garden, NC
TELEPHONE: (336) 247-
VMO
COUNTY Vance

Number of Primary Enclosures 31 Animals Present: Dogs 30 Cats 10

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

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

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)

Transportation

□ 29. Care in Transit Discussed

Veterinary Care

□ 30. Isolation Facility
□ 31. No Signs of Illness/ Treated

APPROVED □ CONDITIONALLY APPROVED □ DISAPPROVED

Inspector’s Signature

Owner/Authorized Agent’s Signature

Date 11/16/09 Time: 1:01

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

PAGE 1 OF 2
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BUSINESS NAME: Vance Co Animal Shelter

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>#7</td>
<td>Need To Make Sure That The Kennel Gates Are Secured Properly, So The Dogs Cannot Push The Gate Open.</td>
<td></td>
</tr>
<tr>
<td>#18</td>
<td>Need To Install More Gravel Around The Back Side Of The Shelter. There Is Water Standing And This Is A Safety Issue For The Employees. Both These Issues Need To Be Addressed As Soon As Possible. I Noticed Some White Plastic Buckets Utilized For Water In The Kennels Chewed On. The Chewed On Buckets Need To Be Replaced.</td>
<td></td>
</tr>
</tbody>
</table>

APPROVED □ CONDITIONALLY APPROVED □ DISAPPROVED

Inspector’s Signature

Owner/Authorized Agent’s Signature

AW-2
Rev. 1/07
White= Office
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