ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 35° 41' 16.7" W: 78° 53' 21.9"

LICENSE #: 57
TYPE FACILITY: Animal Shelter (Private/Public) X Boarding Kennel □ Pet Shop □ Public Auction □
BUSINESS NAME: Wake County Animal Shelter
OWNER: Wake County Government
ADDRESS: 820 Beacon Lake Dr, Raleigh, NC 27610
TELEPHONE: (919) 250-4414
VMO Hunter
COUNTY White

Number of Primary Enclosures 140-Dog 100-Cat
Animals Present: Dogs 144 Cats 40

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

STRUCTURE

Housing Facilities
X 1. Structure & Repair
X 2. Ventilation & Temp.
X 3. Lighting
X 4. Ceiling, Wall, Floors
X 5. Storage
X 6. Water Drainage

Primary Enclosures
X 7. Structure & Repair
X 8. Space
X 10. Adequate Shelter

SANITATION

X 11. Waste Disposal
X 12. Odor
X 13. Ceiling, Wall, Floors
X 14. Primary Enclosures
X 15. Equipment & Supplies
X 16. Washrooms, Sinks, Basins
X 17. Insect/Vermin Control
X 18. Building & Grounds

SPECIAL ITEMS

HUSBANDRY

X 19. Adequate Feed/Water
X 20. Food Storage
X 21. Personnel
X 22. Ratio of 1:10 personnel to animals if >4 in primary enclosure or common area
X 23. Animals’ Appearance

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

Transportation
X 29. Care in Transit Discussed

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

APPROVED □ CONDITIONALLY APPROVED □ DISAPPROVED

Date: 2/07 Time: 10:45 AM

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 INSPECTION CONTINUATION PAGE

LICENSE #: 57
TYPE FACILITY: Animal Shelter (Private/Public) ☑ Boarding Kennel □ Pet Shop □ Public Auction □
BUSINESS NAME: Wake County Animal Shelter
OWNER: Wake CO Government
ADDRESS: 829 Benson Lake Dr Raleigh NC 27607
TELEPHONE: (919) 250-4474

<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></td>
<td>In reference to the complaint of a shelter employee crushing a dog's trachea during euthanasia, the shelter director advised that he can not confirm that there is an investigation at this time.</td>
<td></td>
</tr>
</tbody>
</table>

☑ APPROVED □ CONDITIONALLY APPROVED □ DISAPPROVED

Inspector's Signature

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