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: 35.39703 W: 77.97847

LICENSE #: 78
TYPE FACILITY: Animal Shelter (Private/Public) □ Boarding Kennel □ Pet Shop □ Public Auction □
BUSINESS NAME: Wayne County Animal Shelter Adoption & Education Center
OWNER: Wayne Co. Gov.
ADDRESS: 1600 Clingman St., P.O. Box 227, Goldsboro, NC 27533-0227
TELEPHONE: (919) 731-1439
VMO □ Shelter □
COUNTY Wayne

Number of Primary Enclosures 162 Animals Present: Dogs 61 Cats 38

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

Record
24. Description of Animals
25. Records/Vet Treatment
26. Origin/Disposition
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
23. Animals’ Appearance

Transportation
29. Care in Transit Discussed

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

APPROVED □ CONDITIONALLY APPROVED □ DISAPPROVED

Date: 8-11-08 Time: 11:30 AM

Inspector’s Signature

Owner/Authorized Agent’s Signature

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

PAGE 1 OF 2
ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: 78
TYPE FACILITY: Animal Shelter (Private/Public) ☐  Boarding Kennel ☐  Pet Shop ☐  Public Auction ☐
BUSINESS NAME: Wayne Co. A.S.
OWNER:
ADDRESS: Cont.
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>Wayne Co. Animal Shelter is new called Wayne County Adoption + Education Center.</td>
<td></td>
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<tr>
<td>The new address is 1600 Clingman St. Shelter moved to new facility 8-1-08.</td>
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<tr>
<td>All new Kennels have been installed.</td>
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<tr>
<td>Drainage is installed so that cross contamination is not an issue.</td>
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<tr>
<td>Resting Surfaces are available in all Kennels.</td>
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<tr>
<td>Temperatures are within range in all Kennel areas.</td>
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<tr>
<td>Discussed keeping a more detailed medical log.</td>
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<tr>
<td>The guillotine doors have metal protectors to prevent dogs from damaging the Kennel walls.</td>
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<tr>
<td>New food and water bowls are being used. Hot water is available for cleaning.</td>
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<tr>
<td>Shelter now only uses euthanasia by injection and now has a crematory for animal disposal.</td>
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<tr>
<td>Shelter Director Justin Scoll has expressed concern over the lack of personnel. The new shelter is much larger and the number of staff has not been increased. The shelter is not being run at maximum capacity due to concern over compromising animal care.</td>
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<tr>
<td>An area is planned to wash and disinfect the trucks.</td>
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</tr>
</tbody>
</table>

APPROVED ☑ CONDITIONALLY APPROVED ☐ DISAPPROVED ☐

At: 11-08 11:30 AM

Inspector's Signature: [Signature]
Owner/Authorized Agent's Signature: [Signature]

AW-2
Rev. 1/07
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PAGE 2 OF 2