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: 36.08762 W: 81.10632

LICENSE #: 20434
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Acts 44
OWNER: 1207 Central St. Weldon
ADDRESS:
TELEPHONE: (336) 667-5782
VMO: Wilkes
COUNTY: Wilkes

Number of Primary Enclosures 4 Animals Present: Dogs 4 Cats 3

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 ☐

Date: 5/10/06 Time: 14:30

Inspector's Signature

Owner/Authorized Agent’s Signature

PAGE 1 OF 2
<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>25</td>
<td>Add records to the records</td>
<td></td>
</tr>
<tr>
<td>36</td>
<td>There were no record records for adult and complete records regarding when animals are brought into facility</td>
<td>Done at time of inspection</td>
</tr>
</tbody>
</table>

**APPROVED**

Signature: [Signature]

Inspector's Signature: [Signature]

Date: [Date]

Time: [Time]

White= Office  
Canary= Inspector  
Pink= Owner

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