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: [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] W: [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

LICENSE #: 46
TYPE FACILITY: Animal Shelter (Private/Public) ☑ Boarding Kennel □ Pet Shop □ Public Auction □
BUSINESS NAME: Yadkin County Animal Shelter
OWNER: Yadkin County
ADDRESS: 1627 Speaks Street, Yadkinville, NC
TELEPHONE: (336) 629-2500
VMO COUNTY

Number of Primary Enclosures: 39 Animals Present: Dogs: 1 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/Vermis Control ☑
18. Building & Grounds ☑

SPECIAL ITEMS

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) ☐

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 ☑

Date: 1/8/09 Time: 11:30 am

APPROVED □ CONDITIONALLY APPROVED □ DISAPPROVED □

Inspection’s Signature

Owner/Authorized Agent’s Signature

Page 1 of 2
**ANIMAL WELFARE INSPECTION CONTINUATION PAGE**

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**BUSINESS NAME:** Yadkin County Animal Shelter  
**OWNER:** Yadkin County  
**ADDRESS:** 1627 Speeks Street, Yadkinville, NC.  
**TELEPHONE:** (336) 577-2500

<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>Need to clean behind cat cages daily, everything else looks great. Place smells great. Paperwork is in order. Good job on this issue. Place is clean in main kennel area.</td>
<td></td>
</tr>
</tbody>
</table>

**APPROVED**  
Inspector's Signature: [Signature]  
Date: 11/08/07  
Time: 11:30 a.m.

**CONDITIONALLY APPROVED**  
Owner/Authorized Agent's Signature: [Signature]  
Date: 11/08/07  
Time: 11:30 a.m.

**DISAPPROVED**  
Inspector's Signature: [Signature]  
Canary= Inspector  
Pink= Owner