Type of Inspection
New ☐ _____
Annual ☒ _____
Follow-Up _____
(Prev. Inspection Date)
Complaint ☐ _____
Courtesy ☐ _____
Random ☐ _____

NCDA&CS, VETERINARY DIVISION
ANIMAL WELFARE SECTION
1030 MAIL SERVICE CENTER,
RALEIGH, NC 27699-1030
PHONE: 919/715-7111, FAX: 919/733-6431

INDOOR ☐
OUTDOOR ☐
BOTH ☒

ENTERED

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 35.28745 **W:** 81.49348

LICENSE #: 47
TYPE FACILITY: Animal Shelter (Private/Public) ☒ **Boarding Kennel** ☐ **Pet Shop** ☐ **Public Auction** ☐
BUSINESS NAME: CLEVELAND COUNTY HUMANE SOCIETY
OWNER: SAME
ADDRESS: 1609 EAST MARION ST SHELBY
TELEPHONE: (704) 487-4041
VMO HUNTER
COUNTY CLEVELAND

Number of Primary Enclosures 25 **Animals Present: Dogs** 18 **Cats** 31

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
☐ 9. Ventilation & Temp.
☐ 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

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

SPECIAL ITEMS

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

Transportation
☐ 28. Care in Transit Discussed

Veterinary Care
☐ 28. Isolation Facility
☐ 29. No Signs of Illness/ Treated

☒ **APPROVED** ☐ **DISAPPROVED** Date: Nov 13, 2008 Time: 15:10

Shelley J. Swan — **Inspector's Signature**

Anita Weaver — **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 #: 47
TYPE FACILITY: Animal Shelter (Private/Public) ☒ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: CLEVELAND CO HUMANE SOCIETY
OWNER:
ADDRESS: CONT
TELEPHONE: (_____)_____-_____

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
1	ADD GRAVEL TO BARE AREAS ESP IN FRONT OF KENNELS 12-14	
7	WALLS IN ISOLATION ARE SCRATCHED AND DAMAGED FROM ANIMALS NOT KEPT IN PRIMARY ENCLOSURES RESTRICT ANIMALS IN ISOLATION TO PRIMARY ENCLOSURES AND PAINT AND REPAIR WALLS	
7	DOG HOUSES ARE DAMAGED FROM CHEWING MAKING SANITATION DIFFICULT - REPLACE AS NEEDED	
7	CHAIN LINK IN OUTSIDE KENNELS # 1-2 ARE DAMAGED EXPOSING SHARP EDGES WHICH COULD CAUSE INJURY - REPAIR - ALREADY SCHEDULED	
		JAN 1, 2009

☒ APPROVED ☐ CONDITIONALLY APPROVED ☐ DISAPPROVED Date: 11/13/08 Time: 15:10

Inspector's Signature — Owner/Authorized Agent's Signature

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