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 ☒

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 35.77072 **W:** 80.24454

LICENSE #: 33
TYPE FACILITY: Animal Shelter (Private/Public) ☒ **Boarding Kennel** ☐ **Pet Shop** ☐ **Public Auction** ☐
BUSINESS NAME: DAVIDSON CO ANIMAL SHELTER
OWNER: DAVIDSON CO SHERIFF'S DEPT
ADDRESS: 490 GLENDALE RD LEXINGTON 27292
TELEPHONE: (336) 357-0805
VMO SWAIM
COUNTY DAVIDSON

Number of Primary Enclosures 110 **Animals Present: Dogs** 31 **Cats** 35

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
N/A 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: AUG 13, 2007 Time: 14:52

Shelley Swaim — **Inspector's Signature**

Anita Wood — **Owner/Authorized Agent's Signature**

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

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 CONTINUTATION PAGE

LICENSE #: 33
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: DAVIDSON CO ANIMAL SHELTER
OWNER: CONT
ADDRESS:
TELEPHONE: (_____)_____-_____

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
	NO INADEQUACIES NOTED AT THIS INSPECTION.	
	EVERY THING LOOKS GREAT	
	GOOD JOB	
	PLEASE CHANGE FACILITY NAME.	

☐ APPROVED ☐ DISAPPROVED Date: AUG 13, 2007 Time: 14:52

Shelley J. Swan — Inspector's Signature

Ahula Wood — Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

White= Office Canary= Inspector Pink= Owner

2007

NORTH CAROLINA DEPARTMENT OF AGRICULTURE & CONSUMER SERVICES

STEVE TROXLER COMMISSIONER

LICENSE / CERTIFICATE

LICENSE/CERTIFICA

33

NOT TRANSFERABLE

STATUTE GS 81, 106, 119

LICENSE/CERTIFICATE Public Shelter

EXPIRATION DATE 06/30/2007

ENCLOSURE COUNT 108

INSPECTION DATE 10/30/2006

LICENSEE OR CERTIFICATOR

DAVIDSON COUNTY ANIMAL HOSPITAL
DAVIDSON COUNTY
490 GLENDALE ROAD

LEXINGTON NC 27292

STEVE TROXLER, COMMISSIONER

THIS LICENSE/CERTIFICATE MAY BE SUBJECT TO REVOCATION OR SUSPENSION AS PROVIDED BY LAW.

2008

NORTH CAROLINA DEPARTMENT OF AGRICULTURE & CONSUMER SERVICES

STEVE TROXLER COMMISSIONER

LICENSE / CERTIFICATE

LICENSE/CERTIFICA

33

NOT TRANSFERABLE

STATUTE GS 81, 106, 119

LICENSE/CERTIFICATE Public Shelter

EXPIRATION DATE 06/30/2008

ENCLOSURE COUNT 108

INSPECTION DATE: 02/15/2007

LICENSEE OR CERTIFICATOR

DAVIDSON COUNTY ANIMAL HOSPITAL
DAVIDSON COUNTY
490 GLENDALE ROAD

LEXINGTON NC 27292

STEVE TROXLER, COMMISSIONER

THIS LICENSE/CERTIFICATE MAY BE SUBJECT TO REVOCATION OR SUSPENSION AS PROVIDED BY LAW.