Type of Inspection
New ☐ _____
Annual ☒ EUTH
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: 35.46238 **W:** 80.14681

LICENSE #: 33
TYPE FACILITY: Animal Shelter (Private/Public) ☒ **Boarding Kennel** ☐ **Pet Shop** ☐ **Public Auction** ☐
BUSINESS NAME: Davidson Co Animal Shelter
OWNER:
ADDRESS: 490 Glendale Rd Lexington
TELEPHONE: (336)357-0805
VMO Hunter
COUNTY Davidson

Number of Primary Enclosures 108 **Animals Present: Dogs** 54 **Cats** 56

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. NA Ratio of 1:10 personnel to animals if >4 in primary enclosure or common area
☒ 23. Animals' Appearance

SPECIAL ITEMS

Records
☒ 24. Description of Animals
☒ 25. Records/Vet Treatment
☒ 26. Origin/Disposition
☒ 27. Signature (boarding kennel)
☒ 28. NA 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** ☐ **DISAPPROVED** Date: Aug 23, 2010 Time: 13:30 - 15:00

[signature] **Inspector's Signature**

[signature] **Owner/Authorized Agent's Signature**

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

Animal Welfare Section
NC Department of Agriculture and Consumer Services
1030 Mail Service Center
Raleigh, NC 27699-1030
phone: (919) 715-7111 FAX: (919) 733-6431
e-mail: agr.aws@ncagr.gov URL: www.ncaws.com

Animal Welfare Section, NCDA&CS
Euthanasia Inspection Report

Name of business: Davidson Co Animal Shelter

City: Lexington | License number (if currently licensed): 33 | license type: Shelter

Duties of a CET

Prepare animals for euthanasia .0418: N/A	Properly record all data .0418: Acceptable	Security, controlled substances .0418: Acceptable
Supervise Prob. CET .0418: N/A	Properly euthanize .0418: N/A	Properly dispose of dead .0418: Acceptable

Euthanasia by Injection

IC only on anesth. or sedated .0501: N/A

Euthanasia by CO

Use only bottled gas .0601: Acceptable	Use only comm. mfd chamber .0601: Acceptable	Only same species in chamber .0601: N/A	In chamber for >= 20 min. .0601: N/A
Not used on < 16 weeks .0602: Acceptable	Not used on pregnant .0602: Acceptable	Not used on near death .0602: Acceptable	No live with dead .0603: N/A
Animals separated .0604: N/A	At least 1 viewport .0605: Acceptable	Chamber in good order .0605: Acceptable	Airtight seals present .0605: Acceptable
Light shatterproof .0605: Acceptable	Chamber sufficiently lit .0605: Acceptable	Electrical explosion-proof .0605: Acceptable	If inside, two CO monitors .0605: Acceptable
Records of monthly inspection .0606: Acceptable	Records of yearly inspection .0606: Acceptable	Visual inspection by AWS: Acceptable	
Chamber cleaned b/t uses .0607: Acceptable	Operational guide & or manual .0608: Acceptable	>= 2 adults present when used .0609: Acceptable	

Extraordinary methods

Reports of extraordinary euth. .0705: none available

Policy and procedure manual

Current copy of AWA in manual .0803: Acceptable	Current AVMA euth. in manual .0803: Acceptable	Current HSUS euth. in manual .0803: Acceptable	Current AHA euth. in manual .0803: Acceptable
List of approved euth. methods .0803: Acceptable	List of CETs & methods .0803: Acceptable	Contact info for DVM in PVC .0803: Acceptable	Contact info for DVM care . 0803: Acceptable
List after hour euth. meth. 0803: Acceptable	Euth. methods if no CET present 0803: Acceptable	Policy for verifying death . 0803: Acceptable	Contact info for suppliers. 0803: Acceptable
DEA certificate . 0803: Acceptable	MSDS sheets, chemical or gas . 0803: Acceptable	MSDS sheets, tranq. or anesth. . 0803: Acceptable	Signs & symptoms, human . 0803: Acceptable
First aid information . 0803: Acceptable	MD contact information . 0803: Acceptable		

Signature of inspector: Shelley Swan date: 8/23/10 page 3 of 3 Signature of management

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ANIMAL WELFARE INSPECTION CONTINUTATION PAGE

LICENSE #: 33
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Davidson Co
OWNER:
ADDRESS: Cont
TELEPHONE: (_____)_____-_____

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
(10)	Remove wooden dog houses from outdoor enclosures - replace with houses constructed out of material which is impervious to moisture	
	No animals were available for euthanasia	
	Euthanasia manual is complete	
	Reminder - Yearly chamber inspection is due by Oct 2, 2010	
	No other inadequacies	

☒ APPROVED ☐ DISAPPROVED Date: Aug 23, 2010 Time: 10 13:30

Inspector's Signature

Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

White= Office Canary= Inspector Pink= Owner