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: 35.62697 **W:** 80.48422

LICENSE #: 36
TYPE FACILITY: Animal Shelter (Private/Public) ☒ **Boarding Kennel** ☐ **Pet Shop** ☐ **Public Auction** ☐
BUSINESS NAME: ROWAN CO ANIMAL SHELTER
OWNER: ROWAN HEALTH DEPT
ADDRESS: 1465 JULIAN RD SALISBURY
TELEPHONE: (704) 216-7772
VMO HUNTER
COUNTY ROWAN

Number of Primary Enclosures 61 **Animals Present: Dogs** 49 **Cats** 45

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. NA 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** ☒ **CONDITIONALLY APPROVED** ☐ **DISAPPROVED** Date: 7/9/08 Time: 8:47

Shirley J. Swain
Inspector's Signature

Bianca C. Rupp
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 #: 36
TYPE FACILITY: Animal Shelter (Private/Public) ☒ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: ROWAN CO ANIMAL SHELTER
OWNER:
ADDRESS: CONT
TELEPHONE: (_____)_____-_____

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
7	GATE FRAME RUSTED THROUGH, EXPOSED SHARP EDGES AND DIFFICULT TO SANITIZE - REPLACE / REPAIR	8-1-08
18	DIRTY CAT LITTER DUMPED OUTSIDE OF CAT RUNS - CLEAN UP AND DISPOSE OF PROPERLY	24 HRS
	FECES AND DEBRI IN DRIVE AND GRAVEL FROM CO UNIT - THIS AREA MUST BE CLEANED EACH TIME UNIT IS USED AND CLEANED	24 HRS
23 & 31	SEVERAL DOGS HAVE NASAL DISCHARGE AND ARE COUGHING - RUN #20 ♀ ST BERNARD RUN #17 2 ♂ BOXERS RUN #15 BROWN PBT X ♂	
	TABBY KITTEN LESIONS AROUND MOUTH & NOSE LETHARGIC EMACIATED	
	ISOLATE AND PROVIDE VETERINARY CARE OR EUTHANIZE PROVIDED THAT THIS SHALL NOT AFFECT COMPLIANCE WITH ANY STATE OR LOCAL LAW REQUIRING THE HOLDING FOR A SPECIFIED PERIOD, OF ANIMALS SUSPECTED OF BEING DISEASED	DONE AT TIME OF INSPECTION
7	SEAL CRACKS AND REPAINT KENNELS AND KENNEL AREA	

☒ APPROVED ☒ CONDITIONALLY APPROVED ☐ DISAPPROVED Date: 7/9/08 Time: 8:47

Shelley J. Swann
Inspector's Signature

Frances C. Pepp
Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

White= Office Canary= Inspector Pink= Owner