**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:** 35.30116 **W:** 80.60184

**LICENSE #:** 10147
**TYPE FACILITY:** Animal Shelter (Private/Public) □ **Boarding Kennel** ☒ **Pet Shop** □ **Public Auction** □
**BUSINESS NAME:** ~~Hunter~~ Wyolinca Kennels
**OWNER:**
**ADDRESS:** 1621 Pembroke Rd
**TELEPHONE:** (704) 455-5500
**VMO** Hunter
**COUNTY** Cabarrus

**Number of Primary Enclosures** _____ **Animals Present: Dogs** _____ **Cats** _____

**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**
□ 24. Description of Animals
□ 25. Records/Vet Treatment
□ 26. Origin/Disposition
□ 27. Signature (boarding kennel)
□ 28. 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: 3/27/07 Time: 13:00

Shelley J. Swaim
**Inspector's Signature**

**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 CONTINUATION PAGE

**LICENSE #:** 1014
**TYPE FACILITY: Animal Shelter (Private/Public)** □ **Boarding Kennel** X **Pet Shop** □ **Public Auction** □
**BUSINESS NAME:** Wyolinas Kennels
**OWNER:**
**ADDRESS:** 1621 Pembroke Rd
**TELEPHONE: (_____)_____-_____**

| Item Number | Explanation of Inadequacy (circled items above) And Recommendation For Compliance | Date Corrections Must Be Completed |
|---|---|---|
| | Ceiling is in process of being repaired / replaced - Will be completed by March 31, 2009. Will conduct annual inspection at that time | |

□ **APPROVED** X **CONDITIONALLY APPROVED** □ **DISAPPROVED** Date: 3/17/09 Time: 13:00

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

AW-2
Rev. 1/07

White= Office Canary= Inspector Pink= Owner