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: 35.87517 **W:** 80.36088

LICENSE #: 102
TYPE FACILITY: Animal Shelter (Private/Public) ☐ **Boarding Kennel** ☐ **Pet Shop** ☐ **Public Auction** ☐
BUSINESS NAME: Hart Foundation
OWNER: Amy Hobbs
ADDRESS: 2540 Rocky Hill Rd Lexington
TELEPHONE: (336) 787-5786
VMO Hunter
COUNTY Davidson

Number of Primary Enclosures 16 **Animals Present: Dogs** 20 **Cats** 0

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: 2/10/09 Time: 11:33

Shelley J. Swain
Inspector's Signature

Owner/Authorized Agent's Signature

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

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ENTERED

ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: 102
TYPE FACILITY: Animal Shelter (Private/Public) ☒ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Hart Foundation
OWNER:
ADDRESS: Cont
TELEPHONE: (_____)_____-_____

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
1	Tarps covering kennels are damaged and shredded and are within animals reach posing hazard and making sanitation difficult - remove or replace tarps	
6	Shed storing accessories is junky and disorganized - organize and clean	
7	Gravel lot is in need of gravel also fence must be at least 5ft and requires secondary perimeter fence.	
14	Kennels are wet dogs were not removed during hosing of kennels - If hosing or flushing method is used then animals must be removed while cleaning - squeegie to remove excess water	
18	Trash and debri in and around kennel area - clean up around fence line and kennel area	
19	Some food that was present in food receptacles was wet and contaminated	
23 25 31	9 shep & "Mattie" - marked alopecia paws very swollen - Amy stated dog was diagnosed with Demodex and is being treated with Ivomect. no treatment record -	

3/15/09

☐ APPROVED ☐ CONDITIONALLY APPROVED ☒ DISAPPROVED Date: 2/10/09 Time: 11:33

Shelley J. Sevain
Inspector's Signature

Amy J. Tobbs
Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

White= Office Canary= Inspector Pink= Owner