Type of Inspection
New □
Annual ☒ 12-2-11
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: 35.231677 **W:** 80.929292

LICENSE #: 10030
TYPE FACILITY: Animal Shelter (Private/Public) □ **Boarding Kennel** ☒ **Pet Shop** □ **Public Auction** □
BUSINESS NAME: Horky's Paw Inn
OWNER: Cliff Horky
ADDRESS: 5420 George St. Charlotte NC
TELEPHONE: (704) 399-1609
VMO Hunter
COUNTY Mecklenburg

Number of Primary Enclosures 90 **Animals Present: Dogs** 4 **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.~~ N/A 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. N/A 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: 12-2-11 Time: 10:15am - 11:10am

E. Turner
Inspector's Signature

X Cliff Horky
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 #: 100360
TYPE FACILITY: Animal Shelter (Private/Public) □ Boarding Kennel ☒ Pet Shop □ Public Auction □
BUSINESS NAME: Horky's Paw Inn
OWNER:
ADDRESS: (Cont)
TELEPHONE: (_____)_____-_____

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
	Last Inspection 3-17-10: - Repair rusted/ damaged gate frames. - Check ventilation - reseal cracks - Begin Using Signature sheet. Today's Inspection: #1: Continue to seal all cracks as needed. * Owner is in the process of repainting/repairing all kennels. -No other inadequacies-	

☒ APPROVED ☐ ~~CONDITIONALLY APPROVED~~ ☐ DISAPPROVED Date: 2-2-11 Time: 10:15am-11:10am

E. Sasse
Inspector's Signature

X Cliff Horky
Owner/Authorized Agent's Signature

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