Type of Inspection
New ☒
Annual ☐
Follow-Up _____
(Prev. Inspection Date)
Complaint ☐
Courtesy ☐
Random ☐

NCDA&CS, VETERINARY DIVISION
1030 MAIL SERVICE CENTER, RALEIGH, NC 27699-1030
PHONE: 919/733-7601, FAX: 919/733-2277

INDOOR ☒
OUTDOOR ☐
BOTH ☐

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 35.34623 W: 80.82674

QBSP Number – ☐☐ - ☐☐☐ - ☐☐ - ☐☐ - ☐

BUSINESS NAME: ONE LUCKY PUP LICENSE #: 10797
OWNER: JAYNE MOLNAR & BRANDI GAYLE
ADDRESS: 11607 REAMES RD CHARLOTTE
TELEPHONE: (704) 494-8476 VMO HUNTER COUNTY MECKLENBURG
TYPE FACILITY: Animal Shelter ☐ Boarding Kennel ☒ Dealer ☐ Pet Shop ☐ Public Auction ☐
Number of Primary Enclosures 40 Animals Present: Dogs 5 Cats 0

Inspector: Mark "X" in box, if adequate. Circle 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. Animals' Appearance

SPECIAL ITEMS

Records
- (☒ 23.) Description of Animals
- ☒ 24. Records/Vet Treatment
- ☒ 25. Origin/Disposition
- ☒ 26. Signature (boarding kennel)

Transportation
- ☒ 27. Care in Transit Discussed

Veterinary Care
- ☒ 28. Isolation Facility
- ☒ 29. No Signs of Illness/ Treated

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
(7)	SOME KENNELS HAVE UNEVEN SURFACES - AVOID USING THESE ENCLOSURES UNTIL THEY CAN BE REPAIRED	
(23)	ADD DESCRIPTION TO INTAKE FORM	
	NO OTHER INADEQUACIES NOTED @ THIS TIME NICE FACILITY	
	PLEASE LICENSE	

☒ APPROVED ☐ DISAPPROVED Date: AUG 6, 2008 Time: 11:00

Veterinarian: _____ Telephone: (____)_____-_____

Shelley J. Swain — Inspector's Signature

Jayne Molnar — Owner/Authorized Agent's Signature

AW-2
Rev. 2/05 White= Office Canary= Inspector Pink= Owner