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 4

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 36.31032 **W:** 80.35648

LICENSE #: 10851
TYPE FACILITY: Animal Shelter (Private/Public) □ **Boarding Kennel** 4 **Pet Shop** □ **Public Auction** □
BUSINESS NAME: Lucky Bones
OWNER:
ADDRESS: 680 Riverside Rd Mt Airy
TELEPHONE: (336) 755-8452
VMO Hunter
COUNTY Surry

Number of Primary Enclosures 21 **Animals Present: Dogs** 19 **Cats** 3

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: 10/20/10 Time: 10:45

Shelley Swann
Inspector's Signature

Shelby Bole
Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

White= Office Canary= Inspector Pink= Owner

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ANIMAL WELFARE INSPECTION CONTINUTATION PAGE

LICENSE #: 10851
TYPE FACILITY: Animal Shelter (Private/Public) ☐ **Boarding Kennel** ☒ **Pet Shop** ☐ **Public Auction** ☐
BUSINESS NAME: Lucky Bones
OWNER:
ADDRESS: Cont
TELEPHONE: (_____)_____-_____

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
(7)	Some of the wrought iron kennel fronts are beginning to show rust — Repaint - Do process at this time	
(7)	Painted Kennel flooring that is beginning to chip is scheduled to be tiled - will not use until complete	
(V)	Remove damaged plastic mesh remnants from gate leading to main kennel area	
	No other inadequacies Very Clean Great Facility!!	

☒ **APPROVED** ☐ **DISAPPROVED** Date: Oct 20, 2015 Time: 10:45

Shelley J. Swan
Inspector's Signature

Shelley Boles
Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

White= Office Canary= Inspector Pink= Owner