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

GPS Coordinates - N: 36 50 40  W: 81 58 15

LICENSE #: 16405

TYPE FACILITY: Animal Shelter (Private/Public) Boarding Kennel Pet Shop Public Auction
BUSINESS NAME: Little Horse Creek Farm
OWNER: John & Erin Ray
ADDRESS: 246 Lee Osborne Rd., Reedy Creek, NC
TELEPHONE: (336) 384-4399
COUNTY: Ashe

Number of Primary Enclosures 9  Animals Present: Dogs 3  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
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

SPECIAL ITEMS

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

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

Inspector’s Signature

Date: 3/18/10  Time: 9:15 AM

Owner/Authorized Agent’s Signature

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

PAGE 1 OF 2
ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: 10465
TYPE FACILITY: Animal Shelter (Private/Public) ☑ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Little House, Inc.
OWNER: J. Doe
ADDRESS: 1234 Oak St., Raleigh, NC 27605
TELEPHONE: (336) 384-1391

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Explanation of Inadequacy (circled items above) And Recommendation For Compliance</th>
<th>Date Corrections Must Be Completed</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>&quot;You look ok, keep up the good work.&quot;</td>
<td></td>
</tr>
<tr>
<td></td>
<td>&quot;In order&quot;</td>
<td></td>
</tr>
</tbody>
</table>

☑ APPROVED ☐ CONDITIONALLY APPROVED ☐ DISAPPROVED

Date: 3/18/09 Time: 9:15 AM

Inspector’s Signature

Owner/Authorized Agent’s Signature

White= Office
Canary= Inspector
Pink= Owner

AW-2
Rev. 1/07

PAGE 2 OF 2