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: 35.60406 W: 82.38219

LICENSE #: 103846
TYPE FACILITY: Animal Shelter (Private/Public) x Boarding Kennel x Pet Shop □ Public Auction □
BUSINESS NAME: Top Dog Pet Resort
OWNER: Nicholas Frost
ADDRESS: 12 Cavalier Lane Swannanoa, NC
TELEPHONE: (334) 688-3175
VMO: Hunter
COUNTY: Buncombe

Number of Primary Enclosures 50 Animals Present: Dogs 5 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 x
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

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

Date: 2/18/09 Time: 12:15

Owner/Authorized Agent’s Signature

AW-2
Rev. 1/07

Inspector’s Signature

White= Office
Canary= Inspector
Pink= Owner

PAGE 1 OF 2
LICENSE #: 10356
TYPE FACILITY: Animal Shelter (Private/Public) X Boarding Kennel Pet Shop Public Auction
BUSINESS NAME: Top Dog Pet Resort
OWNER: Nicholas Frost
ADDRESS: 12 Cavalier Lane, Swannanoa, NC
TELEPHONE: (828) 686-3175

<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>#7</td>
<td>Cracks in concrete in outside runs needs to be resealed. Indoor runs where flooring is coming up needs to be repaired or replaced.</td>
<td></td>
</tr>
<tr>
<td>#18</td>
<td>Areas in and around outside runs need to be free of leaves, pine needles and debris. Play/exercise yards need 6” of gravel where bare dirt is present.</td>
<td></td>
</tr>
<tr>
<td>#20</td>
<td>All food is to be stored in sealed containers.</td>
<td></td>
</tr>
<tr>
<td>#23</td>
<td>Shot records on all animals at kennel must be at the facility and up to date.</td>
<td></td>
</tr>
<tr>
<td>#27</td>
<td>A sign-out sheet must be in place for owners to sign when picking up animals. Name of animal, date and who picked up the animal. Re-inspect in two weeks.</td>
<td></td>
</tr>
</tbody>
</table>

☐ APPROVED      ☐ CONDITIONALLY APPROVED ☒ DISAPPROVED  Date: 2/4/09 Time: 12:35
Inspector’s Signature: [Signature]
Owner/Authorized Agent’s Signature: [Signature]

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