ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 36°07'26.9" W: 79°45'01.4"

LICENSE #: 20344
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Petz
OWNER: Cheryl Waynick
ADDRESS: 29 N. 3220 N. Henry Blvd
COUNTY: Guilford

Number of Primary Enclosures - 36
Animals Present: Dogs 47 Cats 0

Inspector: Mark “X” in each box, if adequate.
Circle each item number, if inadequate.
Use NA if not applicable

STRUCTURE

Housing Facilities

Primary Enclosures

SANITATION

HUSBANDRY
22. Ratio of 1:10 personnel to animals if >4 in primary enclosure or common area
23. Animals’ Appearance ☐

SPECIAL ITEMS

Records
22. Description of Animals ☐ 23. Records/Vet Treatment ☐
24. Origin/Disposition ☐ 25. Signature (boarding kennel) ☑ 26. 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: 1/16  Time: 13:15

Inspector's Signature

Owner/Authorized Agent’s Signature

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

PAGE 1 OF 3
**ANIMAL WELFARE INSPECTION CONTINUATION PAGE**

**License #: 2034**

**Type Facility:** Animal Shelter (Private/Public) □ Boarding Kennel □ Pet Shop □ Public Auction □

**Business Name:**

**Owner:**

**Address:**

**Telephone: ( ) - - - - - - - - - -**

<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>521.0204 (c)</td>
<td>Each primary enclosure shall be provided with a solid resting surface or surfaces adequate to comfortably yield all occupants of the enclosure at the same time.</td>
<td></td>
</tr>
<tr>
<td>(3) Dogs and puppies were housed on wire bottom cages with no solid resting surface. Provide all animals with solid resting surface.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>521.0207 (b)</td>
<td>Premises (building and grounds) shall be kept clean and in good repair. Premises shall remain free of accumulations of trash, junk, waste and discarded matter.</td>
<td></td>
</tr>
<tr>
<td>There were accumulations of various and unusual items throughout the facility. The break room and isolation area were difficult to access and movement was tedious — accessories, supplies, and stuff were stored in the isolation enclosures. There was no enclosure available for isolation.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Overall sanitation and husbandry were lacking in all areas. Clean and declutter all areas and maintain.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>521.0209 (b)</td>
<td>Indoor facilities shall be adequately ventilated. Outdoor facilities shall be adequately ventilated to minimize odors.</td>
<td></td>
</tr>
<tr>
<td>(2) There was a distinct odor throughout the dog areas and ventilation was not adequate.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

□ APPROVED □ CONDITIONALLY APPROVED □ DISAPPROVED  

**Date:** 12/10  **Time:** 13:15

**Sheera J. Awan**  
Inspector's Signature

**Canary™ Inspector**  
Owner/Authorized Agent’s Signature

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

**PAGE 2 OF 3**
ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: 20344
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME:  
OWNER:  
ADDRESS:  
TELEPHONE: ( ) -

Item Number | Explanation of Inadequacy (circled items above) And Recommendation For Compliance | Date Corrections Must Be Completed
--- | --- | ---
521.0209 (c) Each primary enclosure shall be provided with a solid resting surface or surfaces adequate to comfortably hold all occupants of the enclosure at the same time.

- Dogs and puppies were housed on wire bottom cages with no solid resting surface. Provide all animals with solid resting surface.

- Premises (building and grounds) shall be kept clean and in good repair. Premises shall remain free of accumulations of trash, junk, waste and discarded matter.

There were accumulations of various and scattered items throughout the facility. The food room and Isolation area were difficult to access and movement was tedious. Accessories, supplies and stuff were stored in the isolation enclosures. There was no enclosure available for isolation.

Overall sanitation and unsanitary were lacking in all areas.

Clean and declutter all areas and maintain.

521.0209 (d) Indoor facilities shall be adequately ventilated. Air flow shall be adequate to prevent odors. There was a distinct odor throughout the dog areas and back room.

☐ APPROVED  ☐ CONDITIONALLY APPROVED  ☐ DISAPPROVED  

Date: 11/4/06  Time: 13:15

Inspector’s Signature:  
Owner/Authorized Agent’s Signature:  

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

PAGE 2 OF 3
ANIMAL WELFARE INSPECTION CONTINUATION PAGE

**LICENSE #: 20344**

**TYPE FACILITY:** Animal Shelter (Private/Public) ☐ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐

**BUSINESS NAME:**

**OWNER:**

**ADDRESS:**

**TELEPHONE:** (___)_-_____

<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>23.6</td>
<td>There was a small black chihuahua puppy that appeared depressed and lethargic. A veterinarian was expected sometime to tag and isolate puppy and consult veterinarian.</td>
<td></td>
</tr>
<tr>
<td>24.0</td>
<td>Most records were incomplete as they related to origin and description.</td>
<td></td>
</tr>
</tbody>
</table>

52.0.01 Operators of all animal shelters, pet shops, public auctions and dealers shall maintain records on all dogs and cats showing the following:

1) Origin of animals (including names addresses of owners) and date received
2) Description of animals including species, age, sex, breed, color and markings

Waynxick also stated to me that she is bonded dogs at this facility. This facility is not licensed as a boarding kennel.

Please have application and completed PVC submitted to this office by Jan 15, 2010

All inadequacies addressed by Jan 21, 2010

☐ APPROVED ☐ CONDITIONALLY APPROVED ☒ DISAPPROVED

[Signature]

Inspector’s Signature

Date: 1/16/10 Time: 13:15

[Signature]

Owner/Authorized Agent’s Signature

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

PAGE 3 OF 3