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: 35.23147 W: 80.92992

LICENSE #: 10030
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☑ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Horky's Paw Inn
OWNER: Cliff Hockey
ADDRESS: 5420 George St., Charlotte NC
TELEPHONE: (704) 349-1289
VMO Hunter
COUNTY Mecklenburg

Number of Primary Enclosures 90 Animals Present: Dogs ☐ Cats ☐

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

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: 2-2-11 Time: 10-15 am

Approved ☐ Conditionally Approved ☐ Disapproved ☐

Owner/Authorized Agent’s Signature

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

PAGE 1 OF
ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: 100310
TYPE FACILITY: Animal Shelter (Private/Public) ☒ Boarding Kennel ☐ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Horky's Paw Inn
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></td>
<td>- Repair rusted/damaged gate frames.</td>
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<tr>
<td></td>
<td>- Check ventilation.</td>
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<tr>
<td></td>
<td>- Reseal cracks</td>
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<td></td>
<td>- Begin using Signature sheet</td>
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</tbody>
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Today's Inspection
#1: Continue to seal all cracks as needed.
#2: Owner is in the process of repairing all kennels.
-No other inadequacies-

APPROVED ☒ CONDITIONALLY APPROVED ☐ DISAPPROVED ☐

Approved by: [Signature]
Date: ____________ Time: ____________

Inspector’s Signature: [Signature] Date: ____________ Time: ____________
Rev. 1/07

Owner Authorized Agent’s Signature: [Signature] Date: ____________ Time: ____________
White= Office
Canary= Inspector
Pink= Owner