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: 34.12463 W: 80.75248

LICENSE #: 10477

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

BUSINESS NAME: Top Honors Pet Care

OWNER: Leslie Wright

ADDRESS: 5420 Waxhaw-Marion Rd, Waxhaw, NC

TELEPHONE: 704-243-0133

VMO
COUNTY

Number of Primary Enclosures: 93
Animals Present: Dogs 14, 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

Approved □ Disapproved □

Date: 2-15-11
Time: 11:15am - 12:45pm

Inspector’s Signature

Owner/Authorized Agent’s Signature

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

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**ANIMAL WELFARE INSPECTION CONTINUATION PAGE**

**LICENSE #: 0477**

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

**BUSINESS NAME:** Top Paws Pet Care

**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>Previous inspection 9-21-09: Seal cracks.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Today's Inspection:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Enthal #1: Structure &amp; Repair: Continue to seal cracks &amp; clean out drains to</td>
<td></td>
</tr>
<tr>
<td></td>
<td>continue to get rid of cracks.</td>
<td></td>
</tr>
</tbody>
</table>

☑ APPROVED    □ DISAPPROVED

**Date:** 2-15-11  **Time:** 11:15am - 12:45pm

**Inspector’s Signature:** E. Greene

**Owner/Authorized Agent’s Signature:** [Signature]

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White= Office  Canary= Inspector  Pink= Owner