Type of Inspection
New ☐ _____
Annual ☒ _____
Follow-Up _____
(Prev. Inspection Date)
Complaint ☐ _____
Courtesy ☐ _____
Random ☐ _____

NCDA&CS, VETERINARY DIVISION
ANIMAL WELFARE SECTION
1030 MAIL SERVICE CENTER,
RALEIGH, NC 27699-1030
PHONE: 919/715-7111, FAX: 919/733-6431

INDOOR ☐
OUTDOOR ☐
BOTH ☒

ANIMAL WELFARE INSPECTION

GPS Coordinates - N: 35.19770 **W:** 80.79553

ENTERED

LICENSE #: 10760
TYPE FACILITY: Animal Shelter (Private/Public) ☐ **Boarding Kennel** ☒ **Pet Shop** ☐ **Public Auction** ☐
BUSINESS NAME: Posh Pets
OWNER: Chuck VaChris
ADDRESS: 3901 Miriam Dr Charlotte
TELEPHONE: (704) 333-6009
VMO Hunter
COUNTY Mecklenburg

Number of Primary Enclosures _____ **Animals Present: Dogs** 3 **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
- ☐ 9. Ventilation & Temp.
- ☒ 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
- N/A 22. Ratio of 1:10 personnel to animals if >4 in primary enclosure or common area
- ☒ 23. Animals' Appearance

SPECIAL ITEMS

Records
- ☐ 23. Description of Animals
- ☒ 24. Records/Vet Treatment
- ☐ 25. Origin/Disposition
- ☒ 26. Signature (boarding kennel)
- N/A 27. Written permission from owner for commingling (doggie daycare)

Transportation
- ☒ 28. Care in Transit Discussed

Veterinary Care
- ☒ 28. Isolation Facility
- ☒ 29. No Signs of Illness/ Treated

☒ **APPROVED** ☐ **DISAPPROVED** Date: Dec 12, 2008 Time: 13:52

Shelley Swain
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 #: 10760
TYPE FACILITY: Animal Shelter (Private/Public) ☐ Boarding Kennel ☒ Pet Shop ☐ Public Auction ☐
BUSINESS NAME: Posh Pets
OWNER:
ADDRESS: Cont
TELEPHONE: (_____)_____-_____

ENTERED

Item Number	Explanation of Inadequacy (circled items above) And Recommendation For Compliance	Date Corrections Must Be Completed
(2)	Must be able to measure ambient temp in inside Kennel area	
(14) (18)	Build up of fallen leaves in outside Kennel area - Remove and maintain outside Kennel area	
(23) (25)	Make sure records at this facility are complete and available for inspection. - Complete owner information - Complete description of animals done @ inspection	

☒ APPROVED ☐ CONDITIONALLY APPROVED ☐ DISAPPROVED Date: 12/12/08 Time: 13:52

Shelley Swain
Inspector's Signature

Owner/Authorized Agent's Signature

AW-2
Rev. 1/07

White= Office Canary= Inspector Pink= Owner