

Township of Enniskillen---Kennel Inspection Checklist

Owner _____ Date: _____

Location _____

Dogs on the premises at time of inspection: _____

Maximum Capacity: _____

HOUSING & ACCOMMODATION

Site

A=Acceptable **NI=Needs Improvement** **U=Unacceptable** (check off each as applicable)

Is the site sufficiently isolated to prevent complaints from neighbours? A() NI() U()

Does the kennel site allow for satisfactory waste disposal? A() NI() U()

Is a perimeter fence in place to prevent escapes from the property? A() NI() U()

Construction

A=Acceptable **NI=Needs Improvement** **U=Unacceptable** (check off each as applicable)

Is the building adequately insulated to maintain temperatures at acceptable levels? A() NI() U()

Construction

A=Acceptable **NI=Needs Improvement** **U=Unacceptable** (check off each as applicable)

Are the roofs and ceilings maintained in a good state of repair? A() NI() U()

Is the air fresh? A() NI() U()

Is there adequate lighting in all kennel areas? A() NI() U()

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Cages, Pens, Enclosures

A=Acceptable **NI=Needs Improvement** **U=Unacceptable** (check off each as applicable)

Indoor Housing

Do the cages permit each animal to: A() NI() U()

- stand normally to its full height
- lie down in full extended position
- turn around easily

Are the cages solidly constructed to prevent escapes or injuries? A() NI() U()

Cages, Pens, Enclosures

A=Acceptable **NI=Needs Improvement** **U=Unacceptable** (check off each as applicable)

Outdoor Housing

Is there a shaded area to provide relief from direct sunlight in each pen or run? A() NI() U()

Is there shelter from rain or snow in each pen or run? A() NI() U()

Is there an area of clean dry bedding under any weather conditions? A() NI() U()

Are the pens or runs sufficiently well drained? A() NI() U()

Are the pens or runs solidly constructed to prevent escapes or injury? A() NI() U()

Food & Water

A=Acceptable **NI=Needs Improvement** **U=Unacceptable** (check off each as applicable)

Is a source of clean potable water available at all times for all cages and runs? A() NI() U()

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Cleanliness

A=Acceptable **NI=Needs Improvement** **U=Unacceptable** (check off each as applicable)

Are all areas free from objectionable odors? A() NI() U()

Are all areas reasonable clean of urine and feces and garbage? A() NI() U()

Purebred Stock

A=Acceptable **NI=Needs Improvement** **U=Unacceptable** (check off each as applicable)

Does the premises meet all municipal permitting requirements? A() NI() U()

Complaints

Nature of complaints in prior year: _____

Actions taken to address complaints: _____

Inspector Comments: (overall assessment)

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I certify that I have inspected these premises in accordance with the protocol established for the licensing of kennel operations within the Township of Enniskillen.

I have granted the license without conditions. _____

I have granted the license with the following conditions: _____

I have not granted the license:

Reasons: _____

Inspected by: _____ Signature: _____

Address: _____ Phone: _____