

American Kennel Club Kennel Check Report

Kennel Owner: Boerner, Nancy

Customer Number(s): _____

AKC Agent: Robert James

Reference #: _____

052634687

Date: 7/21/2009

1. Dog Counts and Breeds

	Total	AKC				
A: Dogs:	13	13				
B: Puppies:	8	8				
C: Total:	21	21	0	0	0	0

Breed(s) of dogs: Bloodhound

2. Identification

A. Dogs: Yes

B. Type of identification: Microchip

If no or partial, explain: _____

C. Puppies: Yes

D. Type of identification: Plastic Collars

E. Scanner: No

3. Kennel Conditions

	<u>Acceptable</u>	<u>Needs Improvement</u>	<u>Unacceptable</u>	
A.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is the construction of the kennels and cages such that they are structurally sound -- in good repair, and without hazardous corners, etc.?
B.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is there sufficient shelter to protect dogs from the elements?
C.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is there adequate space for each dog per kennel or cage, appropriate to the breed?
D.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If there are kennels with wire mesh bottoms, is the wire appropriate for the breed?
E.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is there a source of fresh air by doors, windows or vents, absence of odor?
F.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is there an ample supply of artificial or natural light?

G. Flooring Surface: Gravel

H. Fencing: chain link

I. Housing: Outside, Plastic Dog Houses, covered

4. Cleanliness

	<u>Acceptable</u>	<u>Needs Improvement</u>	<u>Unacceptable</u>	
A.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is the overall appearance clean?
B.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is there an absence of fecal material or other debris?
C.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are water containers present and clean, with fresh water sufficient for each dog?
D.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is fresh food provided daily?
E.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If bedding is available, is it free of noticeable parasites?

F. Feces Disposal: Picked-Up