



AKC Compliance Report

Type of Inspection

First Time Inspection

Westwind Wheatens

Kennel/Pet Shop Name

2/5/2014 05:46 PM

Inspection Date

Sherry

First

Middle

Akers

Last

Akers, Sherry

Customer Name on File

Address

1726 206TH ST

MONTGOMERY

County

057335453

Customer Number

City

RED OAK

State

IA

(712) 623-3611

Phone on record

Owner's Name

Zip

51566-4420

Business Phone

Reference #

Operation Type

Breeder

If different from above

Business Information

DNA Reference #

USDA Inspected

NO

Is the registrant in compliance with AKC Rules, Regulations and Policies?

Inspector Recommendation

Approval

Director Approval

YES

In Compliance

If Warning Letter 3, 4, 5, or 6 has been recommended, customer is advised that the AKC will not process any applications concerning them as of this date. A \$250.00 reinspection fee is required. Customer Initials

Signature of Customer or Firm Representative

Date 2/5/2014

AKC Executive Field Agent

Date 2/5/2014

ID # I22

The AKC does not approve, license or endorse anyone engaged in selling purebred dogs. Any notation of "In Compliance" on this inspection report only denotes that the customer inspected at least met minimum standards for AKC compliance on the date of inspection.

Areas of Non-Compliance

☐ Dog Identification

☐ Customer must meet AKC's Care and Condition policy

☐ Record Keeping

☐ AKC Executive Field Agent-Recommended Follow-up Inspection

Breeder has 7 dogs identified to an AKC ownership record by microchip. Reviewed 3 of six litter records and ownership/breeding records from 2013, and found no omissions. The kennel and dogs are groomed clean and healthy. Food and water are fresh and clean. The exercise area is the farmyard. Other than the disaster plan there are no issues with this kennel on this date.



AMERICAN
KENNEL CLUB®

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AKC Compliance Report

Type of Inspection

General Inspection

2/5/2014 05:48 PM

Inspection Date

Kennel/Pet Shop Name

Steve

First

Middle

Akers

Last

Akers, Steve

Customer Name on File

Address

1726 206TH ST

MONTGOMERY

County

057335454

Customer Number

City

RED OAK

State

IA

(712) 623-3611

Phone on record

Zip

51566-4420

Owner's Name

Business Phone

Reference #

Operation Type

Breeder

If different from above

Business Information

DNA Reference #

USDA Inspected

NO

Is the registrant in compliance with AKC Rules, Regulations and Policies?

Inspector Recommendation

Approval

Director Approval

YES

In Compliance

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American Kennel Club Kennel Check Report

Kennel Owner: Akers, Sherry

Customer Number(s):

AKC Agent: Dennis Foley

Reference #:

057335453

Date: 2/5/2014

1. Dog Counts and Breeds

	Total	AKC				
A: Dogs:	<u>7</u>	<u>7</u>				
B: Puppies:	<u>6</u>	<u>6</u>				
C: Total:	<u>13</u>	<u>13</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>

Breed(s) of dogs: Breed

2. Identification

A. Dogs: Yes

B. Type of identification: Collars & Tags

If no or partial, explain:

C. Puppies: Yes

D. Type of identification: Plastic Collars

E. Scanner: N/A

3. Care and Conditions of Dogs

	<u>Acceptable</u>	<u>Needs Improvement</u>	<u>Unacceptable</u>	
A.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are there visible signs of parasitic infestation?
B.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Any signs of untreated, visible wounds?
C.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are coats matted/dirty/neglected?
D.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is the weight of any dog detrimental to their health?
E.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is fresh food provided daily?
F.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are water containers present and clean, filled with fresh water sufficient for each dog?
G.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are dogs being provided with daily positive human contact and socialization?
H.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is routine and preventative health care being provided to the dogs in the kennel?
I.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	When euthanasia is performed on a dog(s) housed in the kennel, is it done in a humane manner?
J.	Do dogs have access to daily exercise out of cage or pen?			<u>Yes</u>

4. 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 and does it have a protective coating?
E.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If wire flooring is used, is a solid resting platform of sufficient size being provided?
F.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is there a source of fresh air by doors, windows or vents?
G.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is there an absence of odor?
H.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is there an ample supply of artificial or natural light?
I.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is the overall appearance of the kennel clean?
J.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If bedding is available, is it free of noticeable parasites?

K. ☒ ☐ ☐ Is there an absence of fecal material and other debris?

L. Feces Disposal: gutter drain

M. Flooring Surface: Concrete

N. Fencing: Lucky Dog

O. Housing: Garage

5. Kennel Operations

- | | Acceptable | Needs Improvement | Unacceptable | |
|----|---|-------------------------------------|--------------------------|---|
| A. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Is there a sufficient number of staff (individuals) to maintain appropriate levels of care for the number of dogs being kept in the kennel? |
| B. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Does the kennel have a documented emergency preparedness plan that is adequate for the type and number of dogs being housed in the kennel? |
| C. | Explain the emergency plan that is currently in place for the kennel: | | | |

6. Summary of Inspection

- A. Overall, is customer in compliance with AKC's Care Conditions Policy? Yes
- B. Attached documentation: No If Yes, Type:
- C. Time in: 3:30 Time out: 5:00
- D. Explanation of any conditions less than acceptable: Add less than acceptable entries to Summary

5b: A copy of the care and conditions policy along with a copy of the disaster outline was supplied and discussed. The only issue is the plan which the breeder agrees to complete.

7. Record Details

A. Litter records in database: 11

B. Ownership records in database: 10

C. Other Inspections	Date
State	4-13

D. Dogs Reviewed	E. Results	F. Litters Reviewed	G. Dam Name	H. Date of Whelp	I. Results
RN22428601	OK	RN259613	By-Jobe's Kala	10/13/2013	OK
RN22428601	OK	RN255388	Westwind's Ms Josie	7/1/2013	OK
RN21763403	OK	RN248853	By-Jobe's Kala	1/15/2013	OK
RN23969601		RN248695	Westwind's Mckenzie	1/6/2013	
RN24051204		RN248201	Westwind's Ms Josie	12/22/2012	
RN23947001		RN240512	By-Jobe's Kala	6/10/2012	
RN21528106		RN239470	Westwind's Ms Josie	5/19/2012	
RN20952601		RN224854	By-Jobe's Kala	5/9/2011	
		RN215281	By-Jobe's Kala	10/4/2010	
		RN209526	By-Jobe's Kala	12/31/2009	