

Township of Southgate
Building Department
185667 Grey County Road 9
Dundalk, ON N0C 1B0



Phone: 519-923-2110
Toll Free: 1-888-560-6607
Fax: 519-923-9262
Web: www.southgate.ca

Application/Renewal Form for a Kennel License

The Township of Southgate requires all Kennel Operators to register their Kennel

- New Kennel Application
- Application for Kennel Renewal

Owner/Operator Name: _____

Business Name (If different than Owner/Operator): _____

Mailing Address: _____

Concession #: _____ Lot #: _____

Phone (home): _____ Business/Fax: _____

Alternate Phone: _____

Email: _____ Website: _____

Canadian Kennel Club Membership #: _____

Date: _____

Owner Name (print): _____

Signature: _____



Inspection Report for Kennel License

The Township of Southgate requires all Kennel Operators to register their Kennel

- New Kennel Application Report
- Application for Kennel Renewal
1. Water: All Dogs are provided with adequate amounts of water everyday.
 Yes No Owner's Initials: _____
2. Shelter: Every Dog has full access to adequate shelter for the conditions.
 Yes No Owner's Initials: _____
3. Diet: Every Dog is offered a diet which is complete, wholesome, and provided in amounts adequate to maintain normal body conditions for the environmental conditions and amount of exercise. Every Dog should be adequately fed and watered at least once per day, except as directed by a veterinarian when fasting or professionally accepted practises are required.
 Yes No Owner's Initials: _____
4. Confinement: Every Dog is confined in a manner that is safe and free of hazards. If kept in runs, they are constructed of chain link or wire fencing that is secure and all openings are small enough to prevent entrapment and/or injury to any part of the Dog, or escape.
 Yes No Owner's Initials: _____
5. Sanitary Conditions: Kennel building floors, cages and dishes are cleaned daily. Feces is removed daily or more as required and disposed of in a legal manner.
 Yes No Owner's Initials: _____
6. Estrus: Every intact female Dog is kept on the premises with an available confined method which can safely house them under conditions within the Canadian Kennel Club guidelines to prevent any unplanned breeding.

Yes No Owner's Initials: _____

7. Socialization: Every Dog shall be adequately socialized to the point of allowing contact without aggressive behaviours such as baring teeth, growling, signs of fear-biter posturing or attempting to bite (without mitigating factors) toward People or Domestic Animals. Dogs exhibiting maladaptive or pathological behaviour which could result in self injury, injury to others or other undesirable consequences and will be managed with an acceptable and humane program for accommodation and remediation.

Yes No Owner's Initials: _____

8. Quality of Life: Every Dog will be provided with a basic quality of life. Every Dog is given adequate and appropriate opportunities to engage in typical behaviours and activities. No Dog is forced to live under pain or distress or without veterinary intervention for relief from pain or suffering.

Yes No Owner's Initials: _____

9. Vaccinations: Every Dog shall have current vaccinations, including the Rabies Vaccination, as required by law.

Yes No Owner's Initials: _____

10. Socialization: Describe provisions for adequate socialization of juveniles within your Kennel facility:

Date: _____

Owner Name (print): _____

Signature: _____



Inspection Report - Inventory Statement of Types and Breeds of Dogs

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- New Kennel Application Report
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Dates: _____, 20____ to _____, 20____.
(Month) (Year) (Month) (Year)

Dog Name	Identification ID (Microchip, Tag, Tattoo #)	Breed	Age	Sex	Other Info
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					

Dog Name	Identification ID (Microchip, Tag, Tattoo #)	Breed	Age	Sex	Other Info
17.					
18.					
19.					
20.					
21.					
22.					
23.					
24.					
25.					

Date: _____

Owner Name (print): _____

Signature: _____



Inspection Report for Housing and Accommodation Description

The Township of Southgate requires all Kennel Operators to register their Kennel

- New Kennel Application Report
- Application for Kennel Renewal

- Outdoor Kennel
- All Enclosed Standalone Building
- Indoor Kennel and Runs Outdoors
- Other

Zoning and Size of Property: _____

Type and Size of Building: _____

Describe the material type of construction:

Exterior Walls: _____

Interior Walls: _____

Floor: _____

Insulation: _____

Heating, Air Quality and Maintenance:

Air Conditioned: Yes No N/A

Screened Windows: Yes No N/A

Is Running Water Available: Yes No N/A

Or Running Water Near Site Yes No N/A

Ventilation: _____

Number and Size of Windows: _____

Method of Feces Disposal: _____

Cages, Pens, and Enclosures

Number of Pens: _____ Size: _____

Describe Construction: _____

Number of Runs Indoors: _____ Size: _____

Number of Runs Outdoors: _____ Size: _____

Describe Construction: _____

There a perimeter chain link fence or semi-solid wall suitable to prevent escape or injury

- Yes
- No

Description: _____

There is shelter/enclosure/bedding/shade provided in each run or cage

- Yes
- No

There is a separate whelping area provided

- Yes
- No

Supplemental Heat

- Yes
- No

Description: _____

Group housing, if used, describe groups: _____

There is an isolation ward or pen

- Yes
- No

Food and Water

Provision for Food Storage: _____

Vermin Proof Storage Yes No

Food Labelled as Type and Use Yes No

Clean Potable Water at All Times In Cages and Runs

- Yes
- No

Attendants

The Kennel is Operated by Owner Only Yes No

Veterinary Information and Protocols

Veterinary Service is Provided By: _____

Name of Clinic: _____ Phone: _____

Frequency of Vaccinations (Certification of Immunization Required)

Rabies: _____

Canine Distemper/Hepatitis/Parvo Etc.: _____

Other: _____

Parasite Control Product Description and Frequency: _____

Any Euthanasia is Carried out by Veterinarian

Yes No

Other Kennel Information

Are prospective Buyers or Boarders given access to view entire facility Yes No

Is there an Emergency Procedure posted Yes No

Are there Fire Extinguishers in the immediate area Yes No

The Emergency numbers are posted Yes No

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Inspection Report Declaration for Kennel License

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Owner/Operator Declaration:

"I, _____ hereby certify that the forgoing information in the complete Kennel Application is true and correct. I agree to comply with the Canine By-law 2024-078, other applicable By-laws, applicable legislation, regulations, and the Code of Practice for Canadian Kennel Operations. Furthermore, I understand that my property and Kennel are subject to inspections at any time duly appointed by the Canine Control Officer or Municipal By-law Enforcement Officer, or other, appointed by the Township of Southgate and that any failure to disclose information or provide false information, or provide adequate care can result in immediate termination of a Kennel License and/or Fines under the Provincial Offences Act".

Date: _____

Signature: _____

Southgate Certification Report

I, _____ the Canine Control Officer or Municipal By-law Enforcement Officer, or other, appointed by the Township of Southgate have inspected the Kennel located at:

Owned by: _____

This Kennel:

- Does meet each of the requirements set out above
 Does not meet each of the requirements set out above

Requirements not met:

1. _____ 2. _____

3. _____ 4. _____

5. _____ 6. _____

Signed: _____ Date: _____