

**IOWA DEPARTMENT OF AGRICULTURE & LAND STEWARDSHIP**  
 ANIMAL INDUSTRY BUREAU  
 DES MOINES OFFICE: 515-281-6358

**Animal Welfare Inspection Form**

**Insp Date:** 10/25/2022      **Business ID:** 9513

**Inspection:** AB004611

**Business:** PETLAND IOWA  
 1851 LOWER MUSCATINE RD

**Store ID:**

**Phone:** 319-351-9451

IOWA CITY, IA 52240

**Livestock Inspector:** 02 Stephanie Black

**Reason:** Complaint

**Results:** COMPLIANT

**Reference:**

**Licensee Information**

License Number: 9513      Expiration Date 02/09/2023      License Posted

**Inspection Categories**

Commercial Breeder       Animal Shelter       Pet Shop       Commercial Kennel

Boarding Kennel       Pound       Dealer       Public Auction

Rescue       In Home Facility       Dog Daycare       FOO

Number of Animals:    Dogs 0    Cats 0    Puppies 58    Kittens 6

Rabbits       Birds       Reptiles       Rodents       Fish

Temperature \_\_\_\_\_      Humidity \_\_\_\_\_

**Other:**

**INSPECTOR: MARK THE APPROPRIATE BUTTON**

HOUSING FACILITIES	Yes	No	N/A
1. Structure and Repair	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Shelter	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Ventilation, Temperature and Odor	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Lighting	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Ceilings, Walls, Floors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Storage	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Group Housing, Runs & Exercise Areas	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8. Drainage, Waste Disposal and Vermin Control	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

PRIMARY ENCLOSURES	Yes	No	N/A
9. Structure and Repair	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Space and Group Housing	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11. Ventilation & Temperature	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Secured Latches	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

CLEANING AND SANITATION	Yes	No	N/A
13. Washrooms, Basins, Sinks	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Cleaning and Sanitization	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

## Animal Welfare Inspection Form

CARE & HUSBANDRY	Yes	No	N/A
15. Adequate Feed and Water	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Exercise	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Personnel	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
VETERINARY CARE	Yes	No	N/A
18. Isolation Facilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Disease Prevention and Control (including vaccinations)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Symptoms, Illnesses and Treatment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Veterinary Agreement and Inspection	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TRANSPORTATION	Yes	No	N/A
22. Primary Enclosures	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
23. Vehicles	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
24. Care in Transit	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
RECORDS	Yes	No	N/A
25. Purchase, Sale, Transfer, Adoption	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26. Animal Shelter and Pound Records	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
BOARDING KENNEL AND COMMERCIAL KENNEL	Yes	No	N/A
27. Boarding Kennel and Commercial Kennel	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DEALER	Yes	No	N/A
28. Dealer	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
DOG DAY CARE	Yes	No	N/A
29. Dog Day Care	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
RESCUE	Yes	No	N/A
30. Rescue	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
IN HOME FACILITY	Yes	No	N/A
31. In Home Facility	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
FOSTER OVERSIGHT ORGANIZATION	Yes	No	N/A
32. Foster Oversight Organization	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

## Animal Welfare Inspection Form

### **Footnote 1**

**Notes:**

Microchipped male 992000001172216, orange & white, long haired domestic kitten was received/sourced from Parkview Veterinary Clinic, 2135 303rd Ave., Fort Madison, Ia., 52627, 319-372-4841 on 09/20/2022.

According to staff, the kitten was received in good health and underwent routine examination by Dr. Mary Ebert, 10/04/2022. (A copy of this exam is on file and was observed on this day).

Between the dates of 10/04/2022 and 10/11/2022 staff began to notice a decline (weight loss, loose stools) for the animal and it was therefore examined by Dr. Ebert 10/11/2022. Staff was directed to place the kitten on the appropriate dosing of albon suspension.

10/13/2022 when staff arrived at work (06:00) the animal was found deceased in its enclosure.

### **Footnote 2**

**Notes:**

08/23/2022, Current.