IOWA DEPARTMENT OF AGRICULTURE & LAND STEWARDSHIP

ANIMAL INDUSTRY BUREAU **DES MOINES OFFICE: 515-281-6358**

Animal Welfare Inspection Form

Insp Date: 3/25/2024 Business ID: 8642 **Inspection:** AC004643 Store ID:

Business: 4 Paws Inn LLC

1911 Quebec Ave **Phone:** 515-332-5585 Livestock Inspector: 17 Baylee Currie

Hardy, IA 50545 Reason: Annual

Results: ATTEMPTED

Reference:

Licensee Information				
License Number: 8642 Expi	ation Date 09/13/2024 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: Dogs0	Cats0 Puppies0 Kittens	0		
Rabbits "Birds "	Reptiles Rodents Fish			
Temperature	Humidity			
Other:				
INSPECTOR: MARK THE APPROPRIATE BUTT	ON			
HOUSING FACILITIES		Yes	No	N/A
1. Structure and Repair		i	i	i
2. Shelter		i	i	i
3. Ventilation, Temperature and Odor		i	i	i
4. Lighting		i	i	i
5. Ceilings, Walls, Floors		i	i	i
6. Storage		i	i	i
7. Group Housing, Runs & Exercise Areas		i	i	i
8. Drainage, Waste Disposal and Vermin C	ontrol	i	i	i
PRIMARY ENCLOSURES		Yes	No	N/A
9. Structure and Repair		i	i	i
10. Space and Group Housing		i	i	i
11. Ventilation & Temperature		i	i	i
12. Secured Latches		i	i	i
CLEANING AND SANITATION		Yes	No	N/A
13. Washrooms, Basins, Sinks		i	i	i
14. Cleaning and Sanitization		i	i	i

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

Animal Welfare Inspection Form

Footnote 1

Notes:

Family member was at facility at the time of arrival. Stated they would like me to wait till licensee gets back from vacation to do inspection. Stated licensee is on a cruise and can not get ahold of her at this time. Will send an email and text message to let them know I attempted an inspection.