

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

Animal Welfare Inspection Form

Insp Date: 11/9/2021 **Business ID:** 4690
Business: ACKLEY VETERINARY CENTER
 202 SHERMAN AVE

 ACKLEY, IA 50601

Inspection: AG004400
Store ID:
Phone: 641-847-2636
Livestock Inspector: 03 Alissa Puffett
Reason: Annual
Results: COMPLIANT

Reference:

Licensee Information

License Number: 4690 Expiration Date 02/09/2022 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 9 Cats 1 Puppies 0 Kittens 0
 Rabbits Birds Reptiles Rodents Fish
 Temperature 71F Humidity 45%

Other:

INSPECTOR: MARK THE APPROPRIATE BUTTON

HOUSING FACILITIES

Yes	No	N/A
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

1. Structure and Repair
2. Shelter
3. Ventilation, Temperature and Odor
4. Lighting
5. Ceilings, Walls, Floors
6. Storage
7. Group Housing, Runs & Exercise Areas
8. Drainage, Waste Disposal and Vermin Control

PRIMARY ENCLOSURES

Yes	No	N/A
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. Structure and Repair
10. Space and Group Housing
11. Ventilation & Temperature
12. Secured Latches

CLEANING AND SANITATION

Yes	No	N/A
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Washrooms, Basins, Sinks
14. Cleaning and Sanitization

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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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"/>