

IOWA DEPARTMENT OF AGRICULTURE & LAND STEWARDSHIP

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

Animal Welfare Inspection Form

Insp Date: 10/16/2020 **Business ID:** 11652
Business: A DIAMOND IN THE RUFF GROOMING LLC
232 W, 15TH ST

DAVENPORT, IA 52803

Inspection: AK003205
Store ID:
Phone: 563 275 9205
Livestock Inspector: 11 Emily Rogers
Reason: Annual
Results: COMPLIANT

Reference:

Licensee Information

License Number: 11652 Expiration Date _____ License Posted ☐

Inspection Categories

Commercial Breeder ☐ Animal Shelter ☐ Pet Shop ☐ Commercial Kennel ☒
Boarding Kennel ☐ Pound ☐ Dealer ☐ Public Auction ☐
Rescue ☐ In Home Facility ☐ Dog Daycare ☐
Dogs 0 Cats _____

Number of Animals:

Other grooming under construction

INSPECTOR: MARK THE APPROPRIATE BUTTON

HOUSING FACILITIES

Yes No N/A

1. Structure & 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	<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. Runs & Exercise Area	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8. Drainage	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Waste Disposal	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PRIMARY ENCLOSURES

Yes No N/A

10. Structure & Repair	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Space	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Ventilation & Temperature	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Secured Latches	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PREMISES

Yes No N/A

14. Drainage	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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PREMISES	Yes	No	N/A
15. Odor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Sanitation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SANITATION	Yes	No	N/A
17. Washrooms, Basins, Sinks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. Supplies & Materials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Cleaned & Sanitized	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CARE & HUSBANDRY	Yes	No	N/A
20. Adequate Feed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Adequate Water	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. Exercise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Vermin Control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24. Personnel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
VETERINARY CARE	Yes	No	N/A
25. Isolation Facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26. Preventative Programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27. Symptoms & Illness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
28. Therapy Provided	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29. Apparently Healthy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TRANSPORTATION	Yes	No	N/A
30. Primary Enclosures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
31. Vehicles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Care in Transit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
RECORDS	Yes	No	N/A
33. Purchase, Sale, Transfer, Adoption	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
34. Boarding, Grooming Training, Dog Day Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Fail Notes

Chapter 67.7(1)(a) Boarding, Grooming, Training

a. Records shall be made and retained for a period of 12 months for each animal boarded, groomed or trained. Records shall include the following: (1) Owner's name, address, telephone number and email address; (2) Identification of animal; (3) Duration of animal's stay; (4) Service(s) provided; (5) Any illnesses which have occurred and veterinary treatment the animal received; and (6) Written documentation of the animal's vaccinations or vaccination exemptions from a veterinarian.

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RECORDS		Yes No N/A
<i>Fail Notes</i>	<p><i>Chapter 67.7(1)(b) Boarding, Grooming, Training</i></p> <p><i>Chapter 67.7(1)(c) Boarding, Grooming, Training</i></p>	<p><i>b. All dogs and cats transported into boarding kennels and commercial kennels regulated under Iowa Code chapter 162 shall have been vaccinated against distemper, parvo and rabies, unless exempted by Iowa Code section 351.42 or the direct written recommendation of a qualified veterinarian. Vaccine records and exemptions must be kept on file for a period of 12 months for each animal boarded, groomed, or trained.</i></p> <p><i>c. Vaccine titers shall not be accepted as a form of vaccine verification. Vaccine records and written vaccine exemptions shall be kept on file. Acceptable forms of documentation for vaccine verification include the following: (1) Written documentation of vaccination from a veterinarian; (2) A rabies certificate signed by a veterinarian.</i></p>
35. Euthanasia		<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>
36. Vet Inspection Form		<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<i>Fail Notes</i>	<p><i>Chapter 67.4(3)(j) Veterinary Care</i></p>	<p><i>j. Commercial kennels and boarding kennels must have a written agreement with a veterinarian licensed by the state of Iowa to provide veterinary care for an animal in their care should veterinary care be required.</i></p> <p><i>[completed]</i></p>
DEALER		
37. Dealer		<div style="display: flex; justify-content: space-between; font-size: 0.8em;"> Yes No N/A <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> </div>
DOG DAY CARE		
38. Dog Day Care		<div style="display: flex; justify-content: space-between; font-size: 0.8em;"> Yes No N/A <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> </div>
RESCUE		
39. Rescue		<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>
FOSTER OVERSIGHT ORGANIZATION		
40. Foster Oversight Organization		<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>

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Footnote 1

Notes:

contract sign onffs and pet and parent card. filing hard copies