

IOWA DEPARTMENT OF AGRICULTURE & LAND STEWARDSHIP

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

Animal Welfare Inspection Form

Insp Date: 3/29/2021 Business ID: 9818

Business: A DOGGIE IN THE WINDOW
1401 N. 2ND STREET

Clinton, IA 52732

Inspection: AK003410

Store ID:

Phone: 563-212-2056

Livestock Inspector: 11 Emily Rogers

Reason: Annual

Results: COMPLIANT

Reference:

Licensee Information

License Number: 9818 Expiration Date 08/25/2021 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 Cats

Number of Animals:

Other

INSPECTOR: MARK THE APPROPRIATE BUTTON

HOUSING FACILITIES	Yes	No	N/A
1. Structure & Repair	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Shelter	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Ventilation & Temperature	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Lighting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Ceilings, Walls, Floors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Storage	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Runs & Exercise Area	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. Drainage	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. Waste Disposal	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
PRIMARY ENCLOSURES	Yes	No	N/A
10. Structure & Repair	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. Space	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. Ventilation & Temperature	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13. Secured Latches	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
PREMISES	Yes	No	N/A
14. Drainage	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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PREMISES	Yes	No	N/A
15. Odor	i	i	i
16. Sanitation	i	i	i
SANITATION	Yes	No	N/A
17. Washrooms, Basins, Sinks	i	i	i
18. Supplies & Materials	i	i	i
19. Cleaned & Sanitized	i	i	i
CARE & HUSBANDRY	Yes	No	N/A
20. Adequate Feed	i	i	i
21. Adequate Water	i	i	i
22. Exercise	i	i	i
23. Vermin Control	i	i	i
24. Personnel	i	i	i
VETERINARY CARE	Yes	No	N/A
25. Isolation Facilities	i	i	i
26. Preventative Programs	i	i	i
27. Symptoms & Illness	i	i	i
28. Therapy Provided	i	i	i
29. Apparently Healthy	i	i	i
TRANSPORTATION	Yes	No	N/A
30. Primary Enclosures	i	i	i
31. Vehicles	i	i	i
32. Care in Transit	i	i	i
RECORDS	Yes	No	N/A
33. Purchase, Sale, Transfer, Adoption	i	i	i
34. Boarding, Grooming Training, Dog Day Care	i	i	i
35. Euthanasia	i	i	i
36. Vet Inspection Form	i	i	i
DEALER	Yes	No	N/A
37. Dealer	i	i	i
DOG DAY CARE	Yes	No	N/A
38. Dog Day Care	i	i	i
RESCUE	Yes	No	N/A
39. Rescue	i	i	i
FOSTER OVERSIGHT ORGANIZATION	Yes	No	N/A
40. Foster Oversight Organization	i	i	i

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Footnote 1

Notes:

licensee was closed at the time of inspection