

IOWA DEPARTMENT OF AGRICULTURE & LAND STEWARDSHIP

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

Animal Welfare Inspection Form

Insp Date: 11/29/2021 **Business ID:** 11876
Business: 4 PAWS AND A TAIL MOBILE GROOMING - 156
3701 TANGLEWOOD RD

BETTENDORF, IA 52722

Inspection: AK003665
Store ID:
Phone: 5632145533
Livestock Inspector: 11 Emily Rogers
Reason: New
Results: CONSULTATION

Reference:

Licensee Information

License Number: 11876 Expiration Date _____ License Posted p

Inspection Categories

Commercial Breeder ☐ Animal Shelter ☐ Pet Shop ☐ Commercial Kennel p

Boarding Kennel ☐ Pound ☐ Dealer ☐ Public Auction ☐

Rescue ☐ In Home Facility ☐ Dog Daycare ☐ FOO ☐

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

Rabbits ☐ Birds ☐ Reptiles ☐ Rodents ☐ Fish ☐

Temperature _____ Humidity _____

Other: has 2 mobile units - will be sending check for second unit
Please lable this one - 4 Paws and a tail Mobile grooming - 156
the second will be -4 Paws and a tail Mobile grooming - 021

INSPECTOR: MARK THE APPROPRIATE BUTTON

HOUSING FACILITIES

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

PRIMARY ENCLOSURES

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

CLEANING AND SANITATION

	Yes	No	N/A
13. Washrooms, Basins, Sinks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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CLEANING AND SANITATION			Yes	No	N/A
	14. Cleaning and Sanitization		☒	i	i
CARE & HUSBANDRY			Yes	No	N/A
	15. Adequate Feed and Water		☒	i	i
	16. Exercise		i	i	☒
	17. Personnel		☒	i	i
VETERINARY CARE			Yes	No	N/A
	18. Isolation Facilities		☒	i	i
	19. Disease Prevention and Control (including vaccinations)		☒	i	i
Notes	Chapter 67.4(3)(a) Program of Disease Control and Prevention	<i>a. Programs of disease prevention and control shall be established in writing and maintained. [cleanin lists in units - vaccination reminder in office and in agreement]</i>			
	20. Symptoms, Illnesses and Treatment		☒	i	i
	21. Veterinary Agreement and Inspection		i	☒	i
Notes	Chapter 67.4(3)(j) Veterinary Care	<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. [not yet completed]</i>			
TRANSPORTATION			Yes	No	N/A
	22. Primary Enclosures		☒	i	i
	23. Vehicles		☒	i	i
	24. Care in Transit		☒	i	i
RECORDS			Yes	No	N/A
	25. Purchase, Sale, Transfer, Adoption		i	i	☒
	26. Animal Shelter and Pound Records		i	i	☒
BOARDING KENNEL AND COMMERCIAL KENNEL			Yes	No	N/A
	27. Boarding Kennel and Commercial Kennel		☒	i	i
Notes	Chapter 67.7(1)(a) Records	<i>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. [records kept in office, all scheduling completed in office and verrification of vaccination records is retained in office and schedule not made until records are complete.]</i>			
DEALER			Yes	No	N/A
	28. Dealer		i	i	☒
DOG DAY CARE			Yes	No	N/A
	29. Dog Day Care		i	i	☒

Animal Welfare Inspection Form

RESCUE

Yes No N/A

30. Rescue

☐ ☐ ☐

IN HOME FACILITY

Yes No N/A

31. In Home Facility

☐ ☐ ☐

FOSTER OVERSIGHT ORGANIZATION

Yes No N/A

32. Foster Oversight Organization

☐ ☐ ☐

Animal Welfare Inspection Form

Footnote 1

Notes:

vehicles were not in the state today so units were not inspected

Footnote 2

Notes:

Written verification of vaccination status from a veterinarian for each individual pet must be on file at the AW facility

Acceptable written forms of vaccination status are

Documents showing given by and or expiration of the vaccinations from a Veterinarian clinic or office

A signed rabies certificate

An Exemption letter (relevant for distemper and parvo only)

There is no exemption besides <12 weeks of age allowable for rabies (no letter is required)

A titer document alone is not written verification of vaccination for any vaccination

Owner/Breeder given vaccinations still require a Written verification of vaccination status from veterinarian - on veterinarian office or clinic documentation or in a report

There is no exemption allowable for comingle and daycare participants