

IOWA DEPARTMENT OF AGRICULTURE & LAND STEWARDSHIP

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

Animal Welfare Inspection Form

Insp Date: 3/31/2022 **Business ID:** 11981

Business: A DIAMOND IN THE RUFF
232 W. 15TH ST

DAVENPORT, IA 52803

Inspection: AK003806

Store ID:

Phone: 563 200 2935

Livestock Inspector: 11 Emily Rogers

Reason: New

Results: COMPLIANT

Reference:

Licensee Information

License Number: 11981 Expiration Date 03/31/2023 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 0 Cats 0 Puppies 0 Kittens 0

Rabbits ☐ Birds ☐ Reptiles ☐ Rodents ☐ Fish ☐

Temperature Humidity

Other:

INSPECTOR: MARK THE APPROPRIATE BUTTON

HOUSING FACILITIES

| | Yes | No | N/A |
|--|-------------------------------------|--------------------------|-------------------------------------|
| 1. Structure and 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 and Odor | <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. Group Housing, Runs & Exercise Areas | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 8. Drainage, Waste Disposal and Vermin Control | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

PRIMARY ENCLOSURES

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

CLEANING AND SANITATION

| | Yes | No | N/A |
|-------------------------------|-------------------------------------|--------------------------|--------------------------|
| 13. Washrooms, Basins, Sinks | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. Cleaning and Sanitization | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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| 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"/> |
| Notes | <p>Chapter 67.4(3)(j) Veterinary Care 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. [bluegrass vet completed 3-22-22]</p> | | | |
| TRANSPORTATION | | Yes | No | N/A |
| 22. Primary Enclosures | | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 23. Vehicles | | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 24. Care in Transit | | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input 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"/> |
| Notes | <p>Chapter 67.7(1)(a) Records 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. [transitioning through old owners processes]</p> <p>Chapter 67.7(1)(f) Boarding Kennel & Commercial Kennel f. Grooming and training utensils and equipment shall be cleaned and sanitized between use on animals owned by different persons. [discussed details of protocols]</p> | | | |

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| BOARDING KENNEL AND COMMERCIAL KENNEL | | Yes | No | N/A |
|---------------------------------------|--|-----|----|-----|
| <i>Notes</i> | <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p><i>Chapter 67.7(1)(g) Boarding Kennel & Commercial Kennels</i></p> </div> <div style="width: 50%;"> <p><i>g. Primary enclosures shall be cleaned and sanitized between use in containing animals owned by different persons. Primary enclosures must be cleaned at least once daily and sanitized weekly for animals staying overnight. [discussed details of protocols]</i></p> </div> </div> | | | |
| DEALER | | Yes | No | N/A |
| | 28. Dealer | i | i | ☒ |
| DOG DAY CARE | | Yes | No | N/A |
| | 29. Dog Day Care | i | i | ☒ |
| RESCUE | | Yes | No | N/A |
| | 30. Rescue | i | i | ☒ |
| IN HOME FACILITY | | Yes | No | N/A |
| | 31. In Home Facility | i | i | ☒ |
| FOSTER OVERSIGHT ORGANIZATION | | Yes | No | N/A |
| | 32. Foster Oversight Organization | i | i | ☒ |

Animal Welfare Inspection Form

Footnote 1

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 on 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