

IOWA DEPARTMENT OF AGRICULTURE & LAND STEWARDSHIP

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

Animal Welfare Inspection Form

Insp Date: 3/7/2024 **Business ID:** 10942

Business: A TENDER TOUCH GROOMING
813 9TH AVE

CAMANCHE, IA 52730

Inspection: AK004250

Store ID:

Phone: 563-249-2746

Livestock Inspector: 18 Olivia Johnson

Reason: Annual

Results: NON-COMPLIANT

Reference:

Licensee Information

License Number: 10942 Expiration Date 05/24/2024 License Posted p

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 4 Cats 0 Puppies 0 Kittens 0

Rabbits ☐ Birds ☐ Reptiles ☐ Rodents ☐ Fish ☐

Temperature 70f Humidity 40%

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

Animal Welfare Inspection Form

CARE & HUSBANDRY		Yes	No	N/A
15. Adequate Feed and Water		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Exercise		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Personnel		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
VETERINARY CARE		Yes	No	N/A
18. Isolation Facilities		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Disease Prevention and Control (including vaccinations)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Symptoms, Illnesses and Treatment		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Veterinary Agreement and Inspection		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TRANSPORTATION		Yes	No	N/A
22. Primary Enclosures		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Vehicles		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24. Care in Transit		<input 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 type="checkbox"/>
26. Animal Shelter and Pound Records		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
BOARDING KENNEL AND COMMERCIAL KENNEL		Yes	No	N/A
27. Boarding Kennel and Commercial Kennel		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Notes	<p><i>Chapter 67.7(1)(b) Vaccination 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. [Expired distemper/parvo records for 2 dogs.]</i></p>			
DEALER		Yes	No	N/A
28. Dealer		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DOG DAY CARE		Yes	No	N/A
29. Dog Day Care		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
RESCUE		Yes	No	N/A
30. Rescue		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IN HOME FACILITY		Yes	No	N/A
31. In Home Facility		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FOSTER OVERSIGHT ORGANIZATION		Yes	No	N/A
32. Foster Oversight Organization		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Animal Welfare Inspection Form

Footnote 1

Notes:

Completed 4/27/23 by Michael Berkland DVM of Comanche Veterinary Clinic.

Footnote 2

Notes:

Expired distemper/parvo records for 2 dogs. 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. Vaccination records on all pets brought into the facility must be current at time of service. Current records must be obtained to be compliant at re-inspection on or after 3/21/24.