

IOWA DEPARTMENT OF AGRICULTURE & LAND STEWARDSHIP

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

Animal Welfare Inspection Form

Insp Date: 4/13/2023 **Business ID:** 10551

Business: 8TH STREET BOARDING
703 8TH ST

CORRECTIONVILLE, IA 51016

Inspection: AL003382

Store ID:

Phone: 712-873-5098

Livestock Inspector: 10 Sam Burnight

Reason: Annual

Results: COMPLIANT

Reference:

Licensee Information

License Number: 10551 Expiration Date 10/14/2023 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 2 Cats 0 Puppies 0 Kittens 0

Rabbits ☐ Birds ☐ Reptiles ☐ Rodents ☐ Fish ☐

Temperature 70 degrees Humidity 31%

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"/> |
| 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:

All new epoxy floors----very nice

Footnote 2

Notes:

no group housing or exercise

Footnote 3

Notes:

Bleach and Bark Basic 256 sanitizer

Footnote 4

Notes:

separate room for isolation if necessary

Footnote 5

Notes:

Hard copy file on all dogs and shots.

Footnote 6

Notes:

Country side Vet clinic---Merville Ia--Dr. Kate Mathes

Footnote 7

Notes:

Complete records on all dogs and owners