IOWA DEPARTMENT OF AGRICULTURE & LAND STEWARDSHIP

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

Animal Welfare Inspection Form

Insp Date: 6/12/2023 Business ID: 11983 Inspection: AL003427 Store ID:

Business: A DOGS TAIL

1619 12TH AVE

MANSON, IA 50563

Phone: 7122974170

Livestock Inspector: 10 Sam Burnight

Reason: Annual

Results: COMPLIANT

Reference:

| Licensee Information | | | | | | |
|--|------------------------|----------------------|------|-----|----|-----|
| License Number: 11983 Expiration I | Date <u>06/10/2024</u> | License Posted | þ | | | |
| Inspection Categories | | | | | | |
| Commercial Breeder Animal Shelter | Pet Shop | Commercial Kennel | | | | |
| Boarding Kennel Pound | Dealer | Public Auction | | | | |
| Rescue In Home Facility | Dog Daycare | F00 | | | | |
| Number of Animals: Dogs1 Cats | <u>0</u> Puppi | ies <u>0</u> Kittens | | 0 | | |
| Rabbits Birds | Reptiles | Rodents | Fish | | | |
| Temperature 68 degrees | | Humidity 31% | | | | |
| Other: | | | | | | |
| INSPECTOR: MARK THE APPROPRIATE BUTTON | | | | | | |
| HOUSING FACILITIES | | | | Yes | No | N/A |
| Structure and Repair | | | | ¤ | i | i |
| 2. Shelter | | | | ¤ | i | i |
| 3. Ventilation, Temperature and Odor | | | | ¤ | i | İ |
| 4. Lighting | | | | ¤ | i | i |
| 5. Ceilings, Walls, Floors | | | | ¤ | i | i |
| 6. Storage | | | | ¤ | i | i |
| 7. Group Housing, Runs & Exercise Areas | | | | i | i | ¤ |
| 8. Drainage, Waste Disposal and Vermin Control | | | | ¤ | i | i |
| PRIMARY ENCLOSURES | | | | Yes | No | N/A |
| 9. Structure and Repair | | | | ¤ | i | i |
| 10. Space and Group Housing | | | | ¤ | i | i |
| 11. Ventilation & Temperature | | | | ¤ | i | i |
| 12. Secured Latches | | | | ¤ | i | i |
| CLEANING AND SANITATION | | | | Yes | No | N/ |
| 13. Washrooms, Basins, Sinks | | | | ¤ | i | i |
| 14. Cleaning and Sanitization | | | | ¤ | i | i |

Animal Welfare Inspection Form

| A minute World in operation 1 cm | | | |
|---|-----|----|-----|
| 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 |
| 20. Symptoms, Illnesses and Treatment | ¤ | i | i |
| 21. Veterinary Agreement and Inspection | ¤ | i | 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 |
| 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:

This iiiiiiiiiwas a new grooming facalit last year and is very nice and very clean.

Footnote 2

Notes:

Floor is acrylic Over concrete

Footnote 3

Notes:

Tub is stainless steel

Footnote 4

Notes:

Lemon 256 cleaner and santizer.

Footnote 5

Notes:

All shots must be current and kept in computer file with hard copy backup

Footnote 6

Notes:

Manson Vet. Clinic=--Steven Leppert DVM

Footnote 7

Notes:

Computer file on all transactions

Footnote 8

Notes:

Attached to home but has seperate entrance to shop