

IOWA DEPARTMENT OF AGRICULTURE & LAND STEWARDSHIP
ANIMAL INDUSTRY BUREAU
DES MOINES OFFICE: 515-281-6358

Animal Welfare Inspection Form

Insp Date: 8/30/2022 **Business ID:** 11397

Business: A DOG'S DAY OUT
2600 WEST 2ND AVENUE

INDIANOLA, IA 50125

Inspection: AO000383

Store ID:

Phone: 515-823-4002

Livestock Inspector: 14 Bo Greene

Reason: Annual

Results: NON-COMPLIANT

Reference:

Licensee Information

License Number: 11397 Expiration Date 06/14/2023 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 11 Cats 0 Puppies 0 Kittens 0

Rabbits ☐ Birds ☐ Reptiles ☐ Rodents ☐ Fish ☐

Temperature 73f Humidity 57

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

Notes *Chapter 67.3(1)(f) Housing Facilities*

f. Ceilings, walls and floors shall be constructed so as to lend themselves to efficient cleaning and sanitizing. Such surfaces shall be kept in good repair and maintained so that they are substantially impervious to moisture. Floors and walls to a height of four feet shall have finished surfaces. No sharp or jagged edges may be present that may injure an animal. Animal contact surfaces must be free of excessive rust that prevents required cleaning and sanitizing or that affects the structural strength of the surface or that may be detrimental to the health of the animal.

[The paint has been scratched off entry gate exposing unsealed wood /not impervious to moisture.]

- | | | | |
|--|-------------------------------------|--------------------------|--------------------------|
| 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"/> |

Animal Welfare Inspection Form

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"/>
14. Cleaning and Sanitization		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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"/>
Notes	<div style="display: flex; align-items: flex-start;"> <div style="border-right: 1px solid black; padding-right: 10px; margin-right: 10px;"> <i>Chapter 67.4(3)(d) Rabies Vaccinations</i> </div> <div> <i>d. Dogs and cats within all commercial establishments must be vaccinated for rabies when age-appropriate unless exempted by Iowa Code section 351.42. [Multiple dogs missing current vaccinations.]</i> </div> </div>			
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"/>

Animal Welfare Inspection Form

FOSTER OVERSIGHT ORGANIZATION

Yes No N/A

32. Foster Oversight Organization

☐ ☐ ☐

Animal Welfare Inspection Form

Footnote 1

Notes:

Entry gate is constructed of painted wood. The paint has been scratched off the wood exposing unsealed wood /not impervious to moisture. Wood needs resealed by 9.13.22.

Footnote 2

Notes:

Peanut, owner Nicholas Olson not current on rabies. Franki, owned by Bob Lighsinger no rabbies. Harley, owned by Lynn Moen not current on vaccinations.

Barkley, owned by Lynn Moen not current on vaccination. Owner will get current records on file by 9.13.22.

Footnote 3

Notes:

Grooming records in full vaccination records on some animals are past due. Discussed with owner in veterinary care section.