

PET STORE RATING FORM

Pet Store Name and Address:

STORE EVALUATION

Scale: 1=Bad 10=Excellent. Circle one for each criterion.

ANIMAL CARE CRITERIA

- | | | |
|----------------------|-----|-------------------------------------------------------------------------------|
| 1 2 3 4 5 6 7 8 9 10 | 1. | Animals are correctly identified and labeled. |
| 1 2 3 4 5 6 7 8 9 10 | 2. | Enclosures appropriately sized and not overcrowded. |
| 1 2 3 4 5 6 7 8 9 10 | 3. | Enclosures are clean. |
| 1 2 3 4 5 6 7 8 9 10 | 4. | Proper heating provided for each species (type, temperatures). |
| 1 2 3 4 5 6 7 8 9 10 | 5. | UVB lighting provided as needed per species and appropriately installed. |
| 1 2 3 4 5 6 7 8 9 10 | 6. | Water and bowls are clean and provided according to species' needs. |
| 1 2 3 4 5 6 7 8 9 10 | 7. | Prey/Plants for each species is available, properly prepared/fed, and served. |
| 1 2 3 4 5 6 7 8 9 10 | 8. | Animals appear well fed and hydrated. |
| 1 2 3 4 5 6 7 8 9 10 | 9. | No indication of disease, nutritional deficiencies, or parasites. |
| 1 2 3 4 5 6 7 8 9 10 | 10. | Appropriate day/night cycles are being maintained for each species. |

GENERAL INFORMATION AND EDUCATION

- | | | |
|----------------------|-----|------------------------------------------------------------------------------|
| 1 2 3 4 5 6 7 8 9 10 | 11. | Store staff is knowledgeable about the species' and care requirements. |
| 1 2 3 4 5 6 7 8 9 10 | 12. | Staff properly instructs/advises customers before and upon purchase. |
| 1 2 3 4 5 6 7 8 9 10 | 13. | Accurate, updated caresheets care provided to customers for each species. |
| 1 2 3 4 5 6 7 8 9 10 | 14. | Store carries appropriate supplies and equipment for the species sold. |
| 1 2 3 4 5 6 7 8 9 10 | 15. | Endangered herps are marked. No prohibited species are exhibited or on sale. |
| 1 2 3 4 5 6 7 8 9 10 | 16. | Store guarantees the health of its animals for a reasonable period of time. |

Pet Store Name:

SCORING

1 x _____ = _____ 2 x _____ = _____ 3 x _____ = _____

4 x _____ = _____ 5 x _____ = _____ 6 x _____ = _____

7 x _____ = _____ 8 x _____ = _____ 9 x _____ = _____

10 x _____ = _____ **Total Score:** **Cumulative Score:**

RATING:

- Superior (141-160)
- Excellent (121-160)
- Good (101-120)
- Needs Improvement (81-100)
- Should Be Shut Down (< 80)

Reviewer Name, Address, Phone Number:

Review Date:

Review number 1 2 3

Comments: