

MUNICIPAL SHELTER INSPECTION REPORT - DL-90Rating: **Satisfactory365**Purpose: **Inspection**DATE/TOA: **10/22/24 12:00 pm****Boght Veterinary Clinic
1165 New Loudon Road
Cohoes NY 12047**Inspector #: **069**

These are the findings of an inspection of your facility on the date(s) indicated above:

- | | |
|--|----------------|
| 1. Shelter is structurally sound | Yes |
| 2. Housing area and equipment is sanitized regularly | Yes |
| 3. Repairs are done when necessary | Yes |
| 4. Dogs are handled safely | Yes |
| 5. Adequate space is available for all dogs | Yes |
| 6. Light is sufficient for observation | Yes |
| 7. Ventilation is adequate | Yes |
| 8. Drainage is adequate | Yes |
| 9. Temperature extremes are avoided | Yes |
| 10. Clean food and water is available and in ample amount | Yes |
| 11. Veterinary care is provided when necessary | Yes |
| 12. Dogs are euthanized humanely, by authorized personnel | Yes |
| 13. Complete intake and disposition records are maintained for all seized dogs | Yes |
| 14. Dogs transferred for purposes of adoption in compliance with Article 7 | Yes |
| 15. Redemption period is observed before adoption, euthanasia or transfer | Yes |
| 16. Owners of identified dogs are properly notified | Not Applicable |
| 17. Redeemed dogs are licensed before release | Yes |
| 18. Proper impoundment fees paid before dogs are released | Yes |
| 19. Written contract or lease with municipality | Yes |

Town - City - Village Information for Inspection:

TCV CODE	TCV NAME
0102	Town of Bethlehem
3802	Town of Brunswick
0104	Town of Colonie
4202	Town of Glenville
4205	Town of Rotterdam
0112	City of Cohoes
0105	Town of Green Island

REMARKS:

N/A = handled by DCO's

REPRESENTATIVE PRESENT FOR INSPECTION:
TITLE: **Practice Manager**

Julie Kennedy

REVIEWED BY: **Inspector #: 58**
REVIEWED DATE: **10/22/2024**