

MUNICIPAL SHELTER INSPECTION REPORT - DL-90

Rating: **Satisfactory365**

Purpose: **Inspection**

DATE/TOA: **12/18/24 3:00 pm**

**Lake Pleasant Shelter
2679 State Route 8
Lake Pleasant NY 12108**

Inspector #: **81**
Inspector #: **58**

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 Not Applicable
- 12. Dogs are euthanized humanely, by authorized personnel Not Applicable
- 13. Complete intake and disposition records are maintained for all seized dogs Not Applicable
- 14. Dogs transferred for purposes of adoption in compliance with Article 7 Not Applicable
- 15. Redemption period is observed before adoption, euthanasia or transfer Not Applicable
- 16. Owners of identified dogs are properly notified Not Applicable
- 17. Redeemed dogs are licensed before release Not Applicable
- 18. Proper impoundment fees paid before dogs are released Not Applicable
- 19. Written contract or lease with municipality Not Applicable

The municipality owns the facility

Town - City - Village Information for Inspection:

TCV CODE TCV NAME

2006 Town of Lake Pleasant

REMARKS:

N/A = Handled by DCO

REPRESENTATIVE PRESENT FOR INSPECTION:
TITLE: **Town Clerk/Dog Control Office**

Betsy Bain/Steven Rajca

REVIEWED BY: **Inspector #: 58**
REVIEWED DATE: **01/02/2025**