

MUNICIPAL SHELTER INSPECTION REPORT - DL-90Rating: **Unsatisfactory30**Purpose: **Inspection**DATE/TOA: **3/7/25 1:00 pm****TOWN OF OWEGO DOG SHELTER
398 TAYLOR RD
OWEGO NY 13827**Inspector #: **075**

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

1. Shelter is structurally sound	No
<i>Front man-door is not secure, door frame visibly loose.</i>	
2. Housing area and equipment is sanitized regularly	Yes
3. Repairs are done when necessary	No
<i>Front man-door is not secure, door frame visibly loose.</i>	
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	No
<i>Open bag of dog bones/treats not stored in sealed container.</i>	
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	Yes
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	No
<i>Contract for town of Nichols unavailable for review.</i>	

Town - City - Village Information for Inspection:

TCV CODE	TCV NAME
4905	Town of Nichols
4906	Town of Owego

REMARKS:

REPRESENTATIVE PRESENT FOR INSPECTION:
TITLE: **DCO**

Kyle Fleming

REVIEWED BY:
REVIEWED DATE:

Inspector #: 64
03/25/2025