

**MUNICIPAL SHELTER INSPECTION REPORT - DL-90**Rating: **Satisfactory365**Purpose: **Inspection**DATE/TOA: **11/20/25 12:45 pm****Tri-Lakes Humane Society  
255 George La Pan Memorial Highway  
Saranac Lake NY 12983**Inspector #: **65**

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

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|--|----------------|
| 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 |
| <i>DCOs are responsible for owner notification</i>                             |                |
| 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
1613	Town of Franklin
1614	Town of Harrietstown
2007	Town of Long Lake
1511	Town of North Elba
1606	Town of Brighton
1519	Village of Lake Placid
1617	Town of Santa Clara
0913	Town of Saranac
1513	Town of St. Armand
1601	Town of Tupper Lake

REMARKS:

Discussed two hour health assessment, new regulations & checked on ongoing facility renovations.

REPRESENTATIVE PRESENT FOR INSPECTION:  
TITLE: Shelter Manager & Staff

Lena Bombard & Staff

REVIEWED BY:  
REVIEWED DATE:

Inspector #: 58  
11/20/2025