

MUNICIPAL SHELTER INSPECTION REPORT - DL-90

Rating: **Satisfactory365**

Purpose: **Inspection**

DATE/TOA: **6/19/12 12:45 pm**

**N CHAUTAUQUA CANINE RESCUE
 7540 NORTH GALE RD
 WESTFIELD NY 14787**

Inspector #: **815**

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 |
| <i>Dr. Rodgers and Fredonia Animal Hospital share</i> | |
| 12. Dogs are euthanized humanely, by authorized personnel | Yes |
| <i>Vets do euthanasia</i> | |
| 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 | Yes |
| <i>Contract</i> | |

Town - City - Village Information for Inspection:

| <u>TCV CODE</u> | <u>TCV NAME</u> |
|-----------------|-------------------|
| 0622 | Town of Ripley |
| 0627 | Town of Westfield |

REMARKS:

REPRESENTATIVE PRESENT FOR INSPECTION: **Sandy Lutes**
TITLE: **Manager**

REVIEWED BY:
REVIEWED DATE: **06/29/2012**