NEW YORK STATE DEPARTMENT OF AGRICULTURE AND MARKETS
DIVISION OF ANIMAL INDUSTRY
10B AIRLINE DRIVE, ALBANY, NY 12235



# MUNICIPAL SHELTER INSPECTION REPORT - DL-90

Rating: **Satisfactory365** Purpose: **Inspection**

DATE/TOA: **3/27/13 11:10 am**

**ORLEANS COUNTY ANIMAL SHELTER**
**4125 RT 98**
**ALBION NY 14411**

Inspector #: **56**

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 |
| *Barre Animal Hospital or Monroe Veterinary Associates provides services.* | |
| **12. Dogs are euthanized humanely, by authorized personnel** | Yes |
| *NYS Health Department Euthanasia Technician Certificate #584 expiring 2/25/16 is on file for DCO Kathy Smith.* | |
| **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 |
| *Dogs are transferred to a humane society or a not-for-profit incorporated rescue.* | |
| **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 |

Town - City - Village Information for Inspection:

| TCV CODE | TCV NAME |
|---|---|
| 3405 | Town of Gaines |
| 3401 | Town of Albion |
| 3403 | Town of Carlton |
| 3404 | Town of Clarendon |
| 3406 | Town of Kendall |
| 3410 | Town of Yates |
| 3409 | Town of Shelby |
| 3402 | Town of Barre |
| 3407 | Town of Murray |
| 3408 | Town of Ridgeway |

REMARKS:

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

REVIEWED BY: **Inspector #: 14**
REVIEWED DATE: **03/27/2013**