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: **6/10/13 9:15 am**

GENESEE MUNICIPAL SHELTER
PO BOX 52 /661 CO RD 5
LITTLE GENESEE NY 14754

Inspector #: **19**

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
Bleach	
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
Space Heater	
10. Clean food and water is available and in ample amount	Yes
2 times daily	
11. Veterinary care is provided when necessary	Not Applicable
Portville Veterinary Clinic	
12. Dogs are euthanized humanely, by authorized personnel	Not Applicable
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	Not Applicable
No transfers	
15. Redemption period is observed before adoption, euthanasia or transfer	Not Applicable
16. Owners of identified dogs are properly notified	Not Applicable
No identified dogs seized	
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	Not Applicable

Town - City - Village Information for Inspection:

TCV CODE	TCV NAME
0217	Town of Genesee

REMARKS:

REPRESENTATIVE PRESENT FOR INSPECTION: **Gary Wagner**
TITLE: **Shelter manager**

REVIEWED BY: **Inspector #: 14**
REVIEWED DATE: **06/12/2013**