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: **11/6/13 1:00 pm**

TOWN OF ROCHESTER SHELTER
50 SCENIC ROAD
ACCORD NY 12404

Inspector #: **67**

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 and water	
3. Repairs are done when necessary	No
Two temporary pens have plastic ties securing fence to frame. Plastic ties can be chewed allowing for escape or injury. Fencing should be secured with metal clamps to prevent escape or injury. Also last run in enclosed area has wooden board not secured to fence allowing for possible escape or injury. This board should be secured to prevent such injury or escape.	
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
Kingston Animal Hospital or Roundout Valley Veterinary Services	
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
Reviewed section 117 of Article 7 stating dogs are to be held for 5 days. Most dogs transferred to shelter facilities that have contracts with the towns.	
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
5113	Town of Rochester
5119	Town of Wawarsing
5110	Town of New Paltz

REMARKS:

REPRESENTATIVE PRESENT FOR INSPECTION: **Jill Schufeldt**
TITLE: **DCO - manager**

REVIEWED BY: **Inspector #: 18**
REVIEWED DATE: **11/08/2013**