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: **Unsatisfactory30** Purpose: **Inspection**

DATE/TOA: **5/2/14 10:15 am**

AYRES MEMORIAL ANIMAL SHELTER
133 HILL TOP ROAD
SPRAKERS NY 12166

Inspector #: **54**

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

1. Shelter is structurally sound — No

Several chain link run doors have rusty sharp edges at the bottoms of the vertical pipes that make up the door frame.

2. Housing area and equipment is sanitized regularly — Yes

3. Repairs are done when necessary — No

Repair or replacement of the sharp rusty edges as noted above has not been started.

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

Ft. Plain Animal Hospital or Dr. Tom Armistead

12. Dogs are euthanized humanely, by authorized personnel — Yes

Veterinarian

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

Handled by town DCO.

17. Redeemed dogs are licensed before release — Yes

Licensing is handled by the respective town clerks and a copy of the license issued is attached to each seizure and disposition report.

18. Proper impoundment fees paid before dogs are released — Yes

In most cases the impoundment fee is collected by the town clerks at the time of licensing and a printed receipt is attached to the disposition record.

19. Written contract or lease with municipality — Yes

Town - City - Village Information for Inspection:

TCV CODE	TCV NAME
2703	Town of Charleston
2706	Town of Minden
2707	Town of Mohawk
2708	Town of Palatine
2709	Town of Root
2702	Town of Canajoharie
2710	Town of St. Johnsville
2705	Town of Glen

REMARKS:

REPRESENTATIVE PRESENT FOR INSPECTION: **Claire Custer**
TITLE: **Manager**

REVIEWED BY: **Inspector #: 50**
REVIEWED DATE: **05/02/2014**