

MUNICIPAL SHELTER INSPECTION REPORT - DL-90Rating: **Satisfactory365**Purpose: **Inspection**DATE/TOA: **7/16/14 10:15 am****REGIONAL ANIMAL SHELTER, INC.
117 W. FULTON STREET
GLOVERSVILLE NY 12078**Inspector #: **54**

 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. Amy French, Johnstown Animal Clinic</i> | |
| 12. Dogs are euthanized humanely, by authorized personnel | Yes |
| <i>By Veterinarian</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 |
| <i>DCO or shelter handles.</i> | |
| 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
1711	City of Gloversville

REMARKS:

Deficiencies in record keeping including licensing and recording license numbers and receipts for the collection of proper fees for redeemed dogs have been corrected.

 REPRESENTATIVE PRESENT FOR INSPECTION: **Lorrie Venneman**
 TITLE: **Vice pres**

 REVIEWED BY: **Inspector #: 50**
 REVIEWED DATE: **07/17/2014**