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: **10/27/14 11:30 am**

CARMEL ANIMAL HOSPITAL
235 ROUTE 52
CARMEL NY 10512

Inspector #: **61**

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	Not Applicable
No outdoor runs.	
10. Clean food and water is available and in ample amount	Yes
11. Veterinary care is provided when necessary	Yes
12. Dogs are euthanized humanely, by authorized personnel	Yes
13. Complete intake and disposition records are maintained for all seized dogs	No
All seized dogs must include disposition information on records.	
14. Dogs transferred for purposes of adoption in compliance with Article 7	Not Applicable
DCO handles.	
15. Redemption period is observed before adoption, euthanasia or transfer	Not Applicable
DCO handles.	
16. Owners of identified dogs are properly notified	Yes
17. Redeemed dogs are licensed before release	Not Applicable
DCO handles.	
18. Proper impoundment fees paid before dogs are released	Not Applicable
DCO handles.	
19. Written contract or lease with municipality	No
A written contract with the municipality and the animal hospital is needed.	

Town - City - Village Information for Inspection:

TCV CODE	TCV NAME
3702	Town of Kent

REMARKS:

REPRESENTATIVE PRESENT FOR INSPECTION: **Dr. Jack Covitz**
TITLE: **Owner**

REVIEWED BY: **Inspector #: 50**
REVIEWED DATE: **10/31/2014**