NEW YORK STATE DEPARTMENT OF AGRICULTURE AND MARKETS DIVISION OF ANIMAL INDUSTRY 10B AIRLINE DRIVE, ALBANY, NY 12235

Rating: Unsatisfactory30

Purpose: Inspection

DATE/TOA: 8/15/16 1:15 pm

CHARLENE AND ANTHONY SEGE/BACK TO BASICS DOG OBEDIENCE BACK TO BASICS DOG OBEDIENCE 11954 STATE RT 28 FORESTPORT NY 13338

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 | |
| 12. Dogs are euthanized humanely, by authorized personnel | Yes | |
| 13. Complete intake and disposition records are maintained for all seized dogs | No | |
| Many disposition reports were incomplete | | |
| 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 | |
| 17. Redeemed dogs are licensed before release | No | |
| Article 7 requires all dogs must be licensed before released. All disposition report in order to verify licenses were up to date. | license numbers | must be recorded on the |
| 18. Proper impoundment fees paid before dogs are released | No | |
| All redemption fees/impoundment fees must be recorded or attached t correct fees were collected. | to the coinciding s | seizure report to verify the |
| 19. Written contract or lease with municipality | Ves | |

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Inspector #: 64

Yes

Town - City - Village Information for Inspection:

| _ | TCV CODE | | |
|---|----------|-----------------|--|
| | 2005 | Town of Inlet | |
| | 2118 | Town of Webb | |
| | 3020 | Town of Trenton | |
| | | | |

REMARKS:

| REPRESENTATIVE PRESENT FOR INSPECTION: | Charlene Sege | REVIEWED BY: | Inspector #: 14 | |
|--|---------------|---------------------|-----------------|--|
| TITLE: Shelter Co-Owner | | REVIEWED DATE: | 08/22/2016 | |