

MUNICIPAL SHELTER INSPECTION REPORT - DL-90

Rating: **Satisfactory365**Purpose: **Inspection**DATE/TOA: **11/16/10 11:45 am**

**NORTH COUNTRY SPCA
 23 LAKE SHORE ROAD
 WESTPORT NY 12993**

Inspector #: **65**

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

A. Standards of Care

- | | |
|--|----------------|
| 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 |
| <i>Should have crate/kennel available for overnight DCO impoundments. Need dog ID on kennel.</i> | |
| 6. Light is sufficient for observation | Yes |
| 7. Ventilation is adequate | Yes |
| 8. Temperature extremes are avoided | Yes |
| 9. Clean food and water is available and in ample amount | Yes |
| 10. Veterinary care is provided when necessary | Yes |
| 11. Dogs are euthanized humanely, by authorized personnel | Yes |
| 12. Outdoor shelter complies with Article 26 | Not Applicable |

B. Records

- | | |
|---|-----|
| 1. DL-18 Seizure Report is on file for all impounded dogs | Yes |
| 2. Holding period is observed before adoption or euthanasia | Yes |
| 3. All dogs are licensed before release | Yes |
| 4. Impound fee paid before dog is released | Yes |
| 5. Written contract or lease with municipality | Yes |
| 6. Bond is current, updates sent to Ag & Mkts | Yes |

Town - City - Village Information for Inspection:

TCV CODE	TCV NAME
1503	Town of Elizabethtown
1504	Town of Essex
1501	Town of Chesterfield
1505	Town of Jay
1506	Town of Keene
1507	Town of Lewis
1510	Town of Newcomb
1512	Town of North Hudson
1518	Town of Wilmington
1516	Town of Westport
1517	Town of Willsboro

REMARKS:

REPRESENTATIVE PRESENT FOR INSPECTION:
TITLE: **Shelter Manager**

Pam Rock

REVIEWED BY: **Inspector #: 50**
REVIEWED DATE: **11/17/2010**