

MUNICIPAL SHELTER INSPECTION REPORT - DL-90

Rating: **Satisfactory365**Purpose: **Inspection**DATE/TOA: **11/30/10 9:30 am**

**GREAT VALLEY SHELTER
 PO BOX 427/4808 STATE RT 219
 GREAT VALLEY NY 14741**

Inspector #: **19**

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
<i>Bleach</i> | 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. Temperature extremes are avoided
<i>Electric Heater</i> | Yes |
| 9. Clean food and water is available and in ample amount | Yes |
| 10. Veterinary care is provided when necessary
<i>John Inkley DVM</i> | Yes |
| 11. Dogs are euthanized humanely, by authorized personnel
<i>John Inkley DVM</i> | 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
<i>No expiration dates</i> | Yes |
| 6. Bond is current, updates sent to Ag & Mkts | Not Applicable |

Town - City - Village Information for Inspection:

TCV CODE	TCV NAME
0412	Town of Great Valley
0414	Town of Humphrey
0430	Town of Salamanca

REMARKS:

REPRESENTATIVE PRESENT FOR INSPECTION: **Toni Evans**
TITLE: **Town Clerk**

REVIEWED BY: **Inspector #: 14**
REVIEWED DATE: **11/30/2010**