

MUNICIPAL SHELTER INSPECTION REPORT - DL-90Rating: **Satisfactory365**Purpose: **Inspection**DATE/TOA: **9/21/17 1:00 pm****COUNTRY ACRES PET SERVICE
5852 W SCOTT ROAD
HOMER NY 13077**Inspector #: **64**

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 | 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 |
| 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
3106	Town of Fabius
1104	Town of Freetown
1103	Town of Cuyler
5005	Town of Groton
1105	Town of Harford
1106	Town of Homer
5007	Town of Lansing
0509	Town of Locke
0512	Town of Moravia
3113	Town of Otisco
0813	Town of Otselic
0514	Town of Owasco
0816	Town of Pitcher
1109	Town of Preble
1110	Town of Scott
0516	Town of Sempronius
3117	Town of Spafford
0520	Town of Summer Hill
1112	Town of Taylor
1113	Town of Truxton
3118	Town of Tully
1114	Town of Virgil
1115	Town of Willet
0525	Village of Moravia
1117	Village of Homer

REMARKS:

 REPRESENTATIVE PRESENT FOR INSPECTION:
 TITLE: **DCO/Shelter manager**
Lindsay AndersonREVIEWED BY: **Inspector #: 14**REVIEWED DATE: **10/02/2017**