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: **Satisfactory365** Purpose: **Inspection**

DATE/TOA: **12/26/17 12:00 pm**

BROOME COUNTY DOG SHELTER
110 CUTLER POND ROAD
BINGHAMTON NY 13905

Inspector #: **54**

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

1. Shelter is structurally sound	Not Applicable
2. Housing area and equipment is sanitized regularly	Not Applicable
3. Repairs are done when necessary	Not Applicable
4. Dogs are handled safely	Not Applicable
5. Adequate space is available for all dogs	Not Applicable
6. Light is sufficient for observation	Not Applicable
7. Ventilation is adequate	Not Applicable
8. Drainage is adequate	Not Applicable
9. Temperature extremes are avoided	Not Applicable
10. Clean food and water is available and in ample amount	Not Applicable
11. Veterinary care is provided when necessary	Not Applicable
12. Dogs are euthanized humanely, by authorized personnel	Not Applicable
13. Complete intake and disposition records are maintained for all seized dogs	Not Applicable
14. Dogs transferred for purposes of adoption in compliance with Article 7	Not Applicable
15. Redemption period is observed before adoption, euthanasia or transfer	Not Applicable
16. Owners of identified dogs are properly notified	Not Applicable
17. Redeemed dogs are licensed before release	Not Applicable
18. Proper impoundment fees paid before dogs are released	Not Applicable
19. Written contract or lease with municipality	Yes

Town - City - Village Information for Inspection:

TCV CODE	TCV NAME
0306	Town of Dickinson
0307	Town of Fenton
0301	Town of Barker
0303	Town of Chenango
0305	Town of Conklin
0308	Town of Kirkwood
0311	Town of Nanticoke
0314	Town of Union
0316	Town of Windsor
0317	City of Binghamton

REMARKS:

Former name 'Front Street Dog Shelter'
Received copy of the Town of Nanticoke's signed contract for shelter services by email. No additional facility inspection conducted.

REPRESENTATIVE PRESENT FOR INSPECTION: **N/A**
TITLE: **N/A**

REVIEWED BY: **Inspector #: 50**
REVIEWED DATE: **01/02/2018**