

MUNICIPAL SHELTER INSPECTION REPORT - DL-90

Rating: **Satisfactory182**

Purpose: **Inspection**

DATE/TOA: **12/28/17 12:45 pm**

**ROCHESTER ANIMAL SERVICES
 184 VERONA STREET
 ROCHESTER NY 14608**

Inspector #: **56**

Inspector #: **14**

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 |
| <i>See "REMARKS".</i> | |
| 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 |
| <i>See "REMARKS".</i> | |
| 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 | Not Applicable |

Town - City - Village Information for Inspection:

TCV CODE	TCV NAME
2620	City of Rochester

REMARKS:

Regarding "Repairs are done when necessary": Dog run I-7 had a fist sized hole in the wall which exposed the insulation. A dog was removed and the run will not be used until repairs are made. A work order was submitted.

Regarding "Complete intake and disposition records": Dog license numbers were not always written on the hard copy report however all license numbers are on file in a computer program. Having license numbers written on the hard copy allows for ease of inspection.

REPRESENTATIVE PRESENT FOR INSPECTION:
TITLE: Shelter Manager and ACO res|

Jonelle Lang and Amy
Bianchi

REVIEWED BY: Inspector #: 14
REVIEWED DATE: 01/03/2018