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: **Unsatisfactory30** Purpose: **Inspection**

DATE/TOA: **5/29/19 12:30 pm**

STAMEN ANIMAL HOSPITAL
61 QUAKER RIDGE ROAD
NEW ROCHELLE NY 10804

Inspector #: **61**

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	No
Records are incomplete. Animal Hospital must contact the DCO to make copies from his records.	
14. Dogs transferred for purposes of adoption in compliance with Article 7	Not Applicable
DCO handles	
15. Redemption period is observed before adoption, euthanasia or transfer	Not Applicable
DCO handles	
16. Owners of identified dogs are properly notified	Not Applicable
DCO handles	
17. Redeemed dogs are licensed before release	Not Applicable
DCO handles	
18. Proper impoundment fees paid before dogs are released	Not Applicable
DCO handles	
19. Written contract or lease with municipality	Yes

Town - City - Village Information for Inspection:

TCV CODE	TCV NAME
5540	Village of Port Chester
5543	Village of Tuckahoe

REMARKS:

REPRESENTATIVE PRESENT FOR INSPECTION: **Patty O'Leary**
TITLE: **Receptionist**

REVIEWED BY: **Inspector #: 18**
REVIEWED DATE: **05/30/2019**