

MUNICIPAL SHELTER INSPECTION REPORT - DL-90

Rating: **Unsatisfactory30**

Purpose: **Inspection**

DATE/TOA: **11/23/20 12:15 pm**

**THE SPCA IN CATTARAUGUS COUNTY
 2944 ROUTE 16
 OLEAN NY 14760**

Inspector #: **68**

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 | No |
| <i>Kennel #6 & #50 have inside concrete blocks that are being dug and broken open</i> | |
| <i>Outside runs - Pondsides - From the Front - #4 & #10 need concrete patching, From the back - #5 & #6</i> | |
| <i>Creekside - From the middle Door - #2, #3, #4, #5, #6, #7, & #9 - Concrete patching</i> | |
| <i>Outside Run - Creekside - Drain pipe from roof gutters has been chewed and broken allow sharp edges and the water drains through the kennel</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 |
| 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
0411	Town of Freedom
0403	Town of Carrollton
0215	Town of Cuba
0429	Town of Red House
0433	City of Olean

REMARKS:

REPRESENTATIVE PRESENT FOR INSPECTION: **Justin Frazier**
TITLE: **Assistant Manager**

REVIEWED BY: **Inspector #: 64**
REVIEWED DATE: **12/11/2020**