

MUNICIPAL SHELTER INSPECTION REPORT - DL-90Rating: **Satisfactory365**Purpose: **Inspection**DATE/TOA: **6/22/21 2:00 pm****MOHAWK HUDSON HUMANE SOCIETY
3 OAKLAND AVENUE
MENANDS NY 12204**Inspector #: **58**

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
3803	Town of East Greenbush
0102	Town of Bethlehem
3802	Town of Brunswick
0107	Town of Knox
0108	Town of New Scotland
3807	Town of North Greenbush
3810	Town of Poestenkill
3811	Town of Sand Lake
3813	Town of Schodack
3814	Town of Stephentown
0110	Town of Westerlo
0111	City of Albany
0112	City of Cohoes
3815	City of Rensselaer
4206	City of Schenectady
3816	City of Troy
0113	City of Watervliet
0105	Town of Green Island

REMARKS:

Recommendations mentioned in previous report dated 5/17/2021 have been implemented. Improvements have been made to the after hours housing area utilized by the DCOs and to the animal food storage area.

REPRESENTATIVE PRESENT FOR INSPECTION:

Caitlin Davis

REVIEWED BY:

Inspector #: 833

TITLE: **Employee**

REVIEWED DATE:

06/22/2021