NEW YORK STATE DEPARTMENT OF AGRICULTURE AND MARKETS DIVISION OF ANIMAL INDUSTRY 10B AIRLINE DRIVE, ALBANY, NY 12235

Rating: Satisfactory91

Purpose: Inspection

DATE/TOA: 11/1/11 9:30 am

Inspector #: 19

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

A. Standards of Care	
1. Shelter is structurally sound	Yes
2. Housing area and equipment is sanitized regularly	Yes
Bleach/1 outside kennel had 9 feces piles and another kennel had 2 feces piles. clean outside kennel due to highway department construction debris being stored On Tuesday, construction debris has been removed and both kennels cleaned. and disinfected upon seized dog removal.	d in front of outside kennel doors.
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
Electric Heater	
10. Clean food and water is available and in ample amount	Yes
11. Veterinary care is provided when necessary	Yes
Fredonia Animal Hospital	
12. Dogs are euthanized humanely, by authorized personnel	Yes
Fredonia Animal Hospital	
13. Outdoor shelter complies with Article 26	Yes

PORTLAND SHELTER

6218 E. MAIN STREET PORTLAND NY 14769

B. Records	
1. Complete intake and disposition records are maintained for all seized dogs	No
Dog seizure and disposition information needs to be kept at shelter	
2. Dogs transferred for purposes of adoption go to approved facilities only	Yes
Erie Co SPCA	
3. Holding period is observed before adoption or euthanasia	Yes
As per DCO records	
4. Redeemed dogs are licensed before release	No
License numbers have not been recorded	
5. Impound fees paid before dogs are released	No
Impoundment fees have not been charged for seized dogs returned quickly to owners.	
6. Impound fees in addition to state mandated fees are set by local law or	No
ordinance	
DCO needs resolution copy for local impoundment fees	
7. Written contract or lease with municipality	Not Applicable

Town - City - Village Information for Inspection:

TCV CODE	TCV NAME
0621	Town of Portland

REMARKS:

REPRESENTATIVE PRESENT FOR INSPECTION: TITLE: **DCO** **Clarence Grover**

REVIEWED BY:Inspector #: 14REVIEWED DATE:11/06/2011

DL-90