

MUNICIPAL SHELTER INSPECTION REPORT - DL-90

Rating: **Satisfactory30**

Purpose: **Inspection**

DATE/TOA: **11/7/11 10:30 am**

**GREAT VALLEY SHELTER
PO BOX 427/4808 STATE RT 219
GREAT VALLEY NY 14741**

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
Kennel-Sol
- 3. Repairs are done when necessary Yes
Kennel wire ends are starting to fray and create sharp ends, suggest kennel wire be secured to prevent dog injury
- 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
Furnace
- 10. Clean food and water is available and in ample amount Yes
- 11. Veterinary care is provided when necessary Yes
John Inkley DVM
- 12. Dogs are euthanized humanely, by authorized personnel Yes
John Inkley DVM
- 13. Outdoor shelter complies with Article 26 Not Applicable

B. Records

- 1. Complete intake and disposition records are maintained for all seized dogs** No
March 2010 was the last recorded seized dog held in the shelter. Highway department employee confirmed dogs have been held in shelter since 2010. A record of each dog held must be kept in shelter.
- 2. Dogs transferred for purposes of adoption go to approved facilities only** No
No records.
- 3. Holding period is observed before adoption or euthanasia** No
No records.
- 4. Redeemed dogs are licensed before release** No
No records.
- 5. Impound fees paid before dogs are released** No
No records.
- 6. Impound fees in addition to state mandated fees are set by local law or ordinance** Yes
Great Valley- fees are set in local law same as Article 7
- 7. Written contract or lease with municipality** Yes
No expiration dates.

Town - City - Village Information for Inspection:

TCV CODE	TCV NAME
0412	Town of Great Valley
0414	Town of Humphrey
0430	Town of Salamanca

REMARKS:

REPRESENTATIVE PRESENT FOR INSPECTION: **Toni Evans**
 TITLE: **Town Clerk**

REVIEWED BY: **Inspector #: 14**
 REVIEWED DATE: **11/08/2011**