

MUNICIPAL SHELTER INSPECTION REPORT - DL-90

Rating: **Unsatisfactory30**Purpose: **Inspection**DATE/TOA: **4/28/23 12:15 pm**

HUMANE SOCIETY OF WALDEN
2489 ALBANY POST ROAD
WALDEN NY 12586

Inspector #: **67**

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 space in first room has holes in sheetrock, electrical outlet exposed to animals; bare wood studs exposed.</i> | |
| <i>Kennel door in "isolation" area has food holder removed- concern of safety of paw / leg injury.</i> | |
| <i>Several exterior runs with dogs in them, have cross bars rusted through with potential for injury.</i> | |
| <i>One exterior run held closed with nylon leash.</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 | No |
| <i>Several bags of dog food stored on the floor can be exposed to floor cleaning chemicals</i> | |
| 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 | No |
| <i>Contract with Town of Mamakating not present.</i> | |

Town - City - Village Information for Inspection:

<u>TCV CODE</u>	<u>TCV NAME</u>
3304	Town of Crawford
4811	Town of Mamakating
3312	Town of Montgomery
3303	Town of Cornwall
5117	Town of Shawangunk

REMARKS:

REPRESENTATIVE PRESENT FOR INSPECTION: **Jody Botjer**
TITLE: **shelter supervisor**

REVIEWED BY: **Inspector #: 833**
REVIEWED DATE: **05/02/2023**