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

MUNICIPAL SHELTER INSPECTION REPORT - DL-90

Purpose: Inspection Rating: Satisfactory365

DATE/TOA: 11/14/11 9:30 am

OLIVE DOG SHELTER PO BOX 180 45 WATSON HOLLOW RD **WEST SHOKAN NY 12494**

Inspector #:

These are th	e findinas	of an ins	pection of	vour facilit	v on the date	(s) indicated ab	ove:

A. Standards of Care			
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		
Recommended additional fencing over tops of inner & outer kennels to increase escape through jumping/climbing.	-		
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		
Recommend resting benches be used instead and/or in addition to, cloth bedding cold/wet concrete kennel flooring.	g to ensure dogs are not lying on		
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. Outdoor shelter complies with Article 26	Yes		
B. Records			
1. Complete intake and disposition records are maintained for all seized dogs	Yes		
2. Dogs transferred for purposes of adoption go to approved facilities only	Yes		
3. Holding period is observed before adoption or euthanasia	Yes		
4. Redeemed dogs are licensed before release	Yes		
5. Impound fees paid before dogs are released	Yes		
6. Impound fees in addition to state mandated fees are set by local law or ordinance	Not Applicable		
State fees in effect-reviewed with secretary. 7. Written contract or lease with municipality	No		

Two dogs housed for Town of Wawarsing without contract. Advised to contact t/o Wawarsing to establish a contract or to refuse any further housing for outside municipalities without a contract.

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Town - City - Village Information for Inspection:

TCV CODE	TCV NAME
5111	Town of Olive

REMARKS:

Provided copies of Article 7 & DCO/Shelter Manual and reviewed changes to dog licensing, adoption & pet overpopulation fund regulations. Also reviewed municipal shelter regulation & contract requirements.

REPRESENTATIVE PRESENT FOR INSPECTION: Ruth Williams/Susan REVIEWED BY: Inspector #: 18
TITLE: Shelter Mgr/Secretary to Town Horner REVIEWED DATE: 11/16/2011