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

MUNICIPAL SHELTER INSPECTION REPORT - DL-90

Rating: **Satisfactory365** Purpose: **Inspection**

DATE/TOA: **11/28/11 5:15 pm**

ANGELICA MUNICIPAL SHELTER
79 CENTER STREET / PO BOX 338
ANGELICA NY 14709

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	
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	
10. Clean food and water is available and in ample amount	Yes
11. Veterinary care is provided when necessary	Yes
Dawn Bennett DVM	
12. Dogs are euthanized humanely, by authorized personnel	Yes
Dawn Bennett DVM	
13. Outdoor shelter complies with Article 26	Not Applicable

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
Cattaraugus Co SPCA	
3. Holding period is observed before adoption or euthanasia	Yes
4. Redeemed dogs are licensed before release	Yes
No redemptions	
5. Impound fees paid before dogs are released	Yes
No redemptions	
6. Impound fees in addition to state mandated fees are set by local law or ordinance	Not Applicable
No redemption fees set in local law	
7. Written contract or lease with municipality	Not Applicable

Town - City - Village Information for Inspection:

TCV CODE	TCV NAME
0207	Town of Angelica

REMARKS:

REPRESENTATIVE PRESENT FOR INSPECTION: **Rodney Manning**
TITLE: **DCO**

REVIEWED BY: **Inspector #: 14**
REVIEWED DATE: **11/30/2011**