

## MUNICIPAL SHELTER INSPECTION REPORT - DL-90

Rating: **Unsatisfactory30**

Purpose: **Inspection**

DATE/TOA: **9/28/23 1:00 pm**

**THE SPCA IN CATTARAUGUS COUNTY**  
**2944 ROUTE 16**  
**OLEAN NY 14760**

Inspector #: **074**

---

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

---

- |  |     |
|--|-----|
| <b>1. Shelter is structurally sound</b>  | Yes |
| <b>2. Housing area and equipment is sanitized regularly</b>  | Yes |
| <b>3. Repairs are done when necessary</b>  | No  |
| <i>In interior kennels, dividing walls have rusted pipes with sharp edges exposed to the dogs. In room being used as a kennel, wood door framing has been chewed and is splintered. In outdoor kennels, repairs needed on crumbling/missing concrete blocks.</i> |     |
| <b>4. Dogs are handled safely</b>  | Yes |
| <b>5. Adequate space is available for all dogs</b>   | Yes |
| <b>6. Light is sufficient for observation</b>  | Yes |
| <b>7. Ventilation is adequate</b>  | Yes |
| <b>8. Drainage is adequate</b>   | Yes |
| <b>9. Temperature extremes are avoided</b>   | Yes |
| <b>10. Clean food and water is available and in ample amount</b>   | Yes |
| <b>11. Veterinary care is provided when necessary</b>  | Yes |
| <b>12. Dogs are euthanized humanely, by authorized personnel</b>   | Yes |
| <b>13. Complete intake and disposition records are maintained for all seized dogs</b>  | Yes |
| <b>14. Dogs transferred for purposes of adoption in compliance with Article 7</b>  | Yes |
| <b>15. Redemption period is observed before adoption, euthanasia or transfer</b>   | Yes |
| <b>16. Owners of identified dogs are properly notified</b>   | Yes |
| <b>17. Redeemed dogs are licensed before release</b>   | Yes |
| <b>18. Proper impoundment fees paid before dogs are released</b>   | Yes |
| <b>19. Written contract or lease with municipality</b>   | Yes |

---

Town - City - Village Information for Inspection:

---

<b>TCV CODE</b>	<b>TCV NAME</b>
0410	Town of Franklinville
0403	Town of Carrollton
0434	City of Salamanca
0430	Town of Salamanca
0431	Town of South Valley

REMARKS:

REPRESENTATIVE PRESENT FOR INSPECTION: **Olivia Ingalls**  
TITLE: **Manager**

REVIEWED BY: **Inspector #: 64**  
REVIEWED DATE: **10/04/2023**