

SHELTER EDUCATIONAL VISIT - AI-SIR-E

Rating: **Completed60**

Purpose: **Educational Visit**

DATE/TOA: **4/1/26 12:00 pm**

**FREDONIA ANIMAL HOSPITAL MUNICIPAL SHELTER
10049 ROUTE 60
FREDONIA NY 14063**

Inspector #: **85**
Inspector #: **074**

An inspection was done of your facility on the date(s) indicated above.

Additional Information for Inspection:

REMARKS:

NYS Shelter Rescue laws, regulations and requirements were reviewed.

REPRESENTATIVE PRESENT FOR INSPECTION: **Sharon Redfield**
TITLE: **Practice Manager**

REVIEWED BY: **Inspector #: 846**
REVIEWED DATE: **04/06/2026**