

**SHELTER EDUCATIONAL VISIT - AI-SIR-E**

Rating: **Completed90**

Purpose: **Educational Visit**

DATE/TOA: **5/11/26 10:00 am**

**TOWN OF BROOKHAVEN MUNICIPAL SHELTER  
300 HORSEBLOCK ROAD  
BROOKHAVEN NY 11719**

Inspector #: **62**  
Inspector #: **87**  
Inspector #: **82**  
Inspector #: **846**

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

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Additional Information for Inspection:

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REMARKS:

**NYS Shelter Rescue laws, regulations,and requirements were reviewed.**

REPRESENTATIVE PRESENT FOR INSPECTION: **Susan Duffy**  
TITLE: **assistant supervisor**

REVIEWED BY: **Inspector #: 852**  
REVIEWED DATE: **05/19/2026**