



Middlesex County Department of Public Safety and Health
Office of Health Services
 75 Bayard Street, 5th Fl., New Brunswick, New Jersey 08901
 732-745-3100
 Lester Jones, Director-Health Officer



INSPECTION REPORT OF KENNELS, PET SHOPS, SHELTERS AND POUNDS

Name of Facility <i>Helmatta Animal Shelter</i>	Address <i>58 man st.</i>	Municipality <i>Helmatta</i>
Type of Facility <i>shelter</i>	Inspector <i>Lester Jones</i> <i>Loellayd</i>	License Number <i>2012-02</i>
Date of Inspection <i>8/18/14</i>	Time of Inspection <i>9:30</i> am/pm to ___ am/pm	Local Health Office Number <i>609-799-0909 x1219</i> <i>732-745-3100</i>
Name/Number of Person in Charge <i>Michael C. [unclear]</i>	Species/Number of Animals <i>45 Dogs 50 Cats Ferrets</i> <i>Birds/Type African Grey</i>	Other Species Type _____ Number _____ Type _____ Number _____

N.J.A.C. 8:23A

1.2 - COMPLIANCE

- b. Certificate of local inspection
- d. Fire inspection
- c. Plan review, if applicable

1.3 - FACILITIES (GENERAL)

- a. General housing condition
- b. Electric power/water test
- c. Storage of food and/or bedding
- d. Disposal of waste and/or carcasses
- e. Facilities for caretaker's cleanliness
- f. Premises (buildings and grounds)

1.4 - FACILITIES (INDOOR)

- a. Indoor facilities/acclimation certificate not provided
- b. Heating
- c. Ventilation
- d&e. Lighting
- f. Interior surfaces not impervious to moisture *2nd floor center door no animals*
- g. Drainage

1.5 - FACILITIES (OUTDOOR)

- a,b,&c. Protection from weather elements
- d. Drainage
- e. Outdoor enclosure surfaces/disposal of run off

1.6 - PRIMARY ENCLOSURES

- a. Primary enclosure requirements
- b,g,&h. Enclosure size/litter receptacle/exercise
- c. Segregation of animals
- d. Disinfection between inhabitants
- e. Isolating contagious animals
- f. Flooring
- i. Suspect rabid animal caging
- j. Tethering in lieu of primary enclosures

1.7 - FEEDING AND WATERING

- a&c. Feeding frequency
- b. Food quality
- d. Location of food receptacles
- e,f,&g. Food receptacles
- h. Potable water/water receptacles

1.8 - SANITATION

- a. Removal of excreta/protection of animals during cleaning
- b. Frequency of cleaning
- c. Disinfection practices
- d. Condition of buildings/grounds
- e. Pest control

N.J.A.C. 8:23A SECTIONS (CONTINUED)

1.9 - DISEASE CONTROL

- a. Disease control and health care program established and maintained by a veterinarian:
Dr. [unclear]
- b,c,&j. Certificate of veterinary supervisor/notification of noncompliance/zoonotic disease reporting
- d. Observation of animals/treatment of injury or illness/stress remediation
- e,k,&l. Handling of rabies suspects
- f. Isolation of animals with communicable disease
- g,h,&i. Isolation rooms
- m&n. Fact sheets/noncompliance of ordered quarantine

1.10 - HOLDING AND RECLAIMING ANIMALS

- a. 1. Seven day stray holding period
- 1-4. Rabies holding period/rabies testing protocol
- 5-6. Elective euthanasia
- b. Facility Sign
- b. 1-5. Public access
- 6-7. Notification of unlicensed dog/impoundment

1.11 - EUTHANASIA

- a&b. Pre-euthanasia handling/sedation
- c&d. Method of euthanasia
- e. Persons administering euthanasia
- f. Euthanasia protocol
- g. Assessment of animals after euthanasia

1.12 - TRANSPORTATION

- a&b. Vehicle requirements
- c,e,&f. Primary enclosures
- d. Animal segregation
- g. Sanitation of enclosures
- h. Emergency veterinary care
- i. Temporary holding facilities

1.13 - RECORDS AND ADMINISTRATION

- a,c,&d. Record keeping
- b. Records not kept on premise
- e. Change in facility status

NJAC 8:23-1 THROUGH 3

- 1.1 Importation of dogs; certification requirements
- 1.2 Reporting of known or suspect rabid animal
- 1.3 Transportation of confined animals
- 1.4 Quarantine, testing and transportation of pet birds
- 1.5 Records of pet birds
- 2.1 Sale of turtle eggs/live turtles
- 3.1 Transportation of animals by ACOs

INITIAL INSPECTION REINSPECTION

RATING: SATISFACTORY CONDITIONALLY SATISFACTORY UNSATISFACTORY

Signature of Owner, Operator, or Representative: *[Signature]* Signature of PSHS: *[Signature]*

*INSPECTION IS BASED ON NJAC 8:23A-1, UNDER AUTHORITY OF NJSA 4:15-15.14. ("X" DENOTES A VIOLATION)

DETAIL DATA SHEET

MUNICIPALITY	DATE	NAME OF ESTABLISHMENT
Helmetta	8/18/14	Helmetta Regional Animal Shelter

REG. NO.	REMARKS (PLEASE SPECIFY AREA)
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(abated) • fire inspection certificate is current & available. Done 1/18/14 exp 10/31/14

(abated) • Floors on first floor dog area of shelter have been sealed & smoothed. floors are now impervious to moisture

1.4f) • floors on second floor of shelter, ^(center of room) dog areas are being re-tiled and repaired. observed areas where new tiling has been installed - ~~process~~ ^{in progress} of repair. Some areas are still peeling

(abated) • observed 1:32 mix of clorox & ^{measuring} water for sanitizing surfaces. ^{observed}

1.4f) • Dog runs inside. several have been repainted & are no longer peeling. Not all dog runs have been re-painted. (work in process)

(abated) • protocols & standing orders have now been reviewed & signed by supervisory veterinarian.

SIGNATURE OF OWNER, OPERATOR OR REPRESENTATIVE	TITLE
Michael Cole	

DETAIL DATA SHEET

MUNICIPALITY	DATE	NAME OF ESTABLISHMENT
Helmetta	8/18/14	Helmetta Regional Animal Shelter

REG. NO.	REMARKS (PLEASE SPECIFY AREA)
1.5d)	outside run (in front) has no drainage
1.5e)	outside run/enclosure has gravel which is not impervious to moisture, is not cleanable & can't be disinfected. Enclosed area should be concrete w/ seal so it can be cleaned & disinfected
1.3a)	dosage records for medicating animals available, dated & signed. color & sex of animal & 'name' observed. ID # of animal should be added to these records.
1.13	shelter is using an electronic shelter record program. As animals enter the shelter they are being added to the system. Shelter staff is in process of adding the animals that are "in house". Paper records are available

SIGNATURE OF OWNER, OPERATOR OR REPRESENTATIVE	TITLE
<i>[Signature]</i>	

DETAIL DATA SHEET

MUNICIPALITY	DATE	NAME OF ESTABLISHMENT
Helmetta	9/18/14	Helmetta Regional Animal Shelter
REG. NO.	REMARKS (PLEASE SPECIFY AREA)	
1.1	<p>shelter staff does have dogs that are imported from other states. Procedure being put into place that paperwork with veterinary signature must be faxed or scanned prior to arrival of dog. Since previous inspection from 7/16 no out of state animals have been received by shelter.</p>	
SIGNATURE OF OWNER, OPERATOR OR REPRESENTATIVE	TITLE	
[Signature]		