Old LEASH pet surrender request form
First name
Maria
Lebron
Street address 1638 Kendrick Dr Apt #A
<b>City</b> Kissimmee
<b>Zip code</b> 34741
Email marialebron76@gmail.com
Phone
(718) 219-8810
Reason for surrender
Owner is not able to care for the dog anymore. He lost his apartment and is doubling up in someone else's house.
My current living situation is I would rather not say.
Animal 1
Animal 1 name Okami
Animal 1 species dog
Animal 1 dog breed Shiba Inu
Animal 1 size 21 - 30 lbs
Animal 1 gender male
Has animal 1 been neutered? yes
Animal 1 age 5 years +
5 years +  Does animal 1 have any known medical issues?
5 years +  Does animal 1 have any known medical issues?  no  Has animal 1 ever bitten anybody?

# How long have you had the animals?

3 - 5 years

# Reason(s) for concern - click all that apply.

- behavior
- moving
- $\bullet \ \ \text{no time for care}$

# If moving, why can't pet(s) go?

Doubling up in someone else's house

# Administration

## Shelter to client contact date

01/09/2023

# **Surrender necessary**

nο

# Staff member making appointment(s).

A B 4

### Multiple appointments?

no

# **Outcome data**

### Call outcome

non responsive to contact/no show

# Final call date

01/09/2023

# **Admin notes**

1/9/23- CALLED MARIA AND SHE STATED SHE IS NOT THE OWNER OF THE DOG AND HER FRIEND THAT MOVED IN WITH HER IS. I STATED THAT BECAUSE SHE IS NOT THE OWNER OF THE DOG, SHE CANNOT SURRENDER IT WOULD HAVE TO BE THE OWNER. I WAS ABOUT TO ASK ABOUT THE BITE HISTORY AND MARIA HUNG UP ON ME. am

### Final surrender outcome

not applicable