# Old LEASH pet surrender request form

**First name** Yaidelis

**Last name** Walker

**City** kissimmee

Zip code

**Street address** 1208 cherokee ct

	-ip code
	34744
	Email Control of the
	Castilloy36@yahoo.com
	Phone
	321) 697-2772
ı	Reason for surrender
-	Homeless
	My current living situation is
	would rather not say.
	Animal 1
	Animai 1
	Animal 1 name
-	- az
	Animal 1 species
(	dog
	Animal 1 dog breed
	Chihuahua
	Animal 1 size
	11 - 20 lbs
	Animal 1 gender
	nale
	las animal 1 been neutered?
	ves .
	Animal 1 age
:	3 - 5 years
	Does animal 1 have any known medical issues?
	las animal 1 ever bitten anybody?
ı	10
	ust a few more questions
	How long have you had the animals?
	3 - 5 years
•	
-	Reason(s) for concern - click all that apply.
	• behavior
	• homeless
	Administration
4	ranninga gaon

#### Shelter to client contact date

03/08/2023

## **Surrender necessary**

yes

Staff member making appointment(s).

ald

# Send appointment email

yes

#### Send wait time notice

...

## Multiple appointments?

no

# Appointment 1

# Date of appointment 1

05/08/2023

# Time of appointment 1

12:00 pm

# **Outcome data**

## Call outcome

surrendered to shelter

## Final call date

03/08/2023

## Admin notes

2/14/23- Called and left VM. AM 2/16/23- Called and left VM.AM

3/8/23 called office and was transferred to us. made appointment for 5/8/23. dog was adopted through us A278927 Taz Chihuahua. not good with other dogs has been bitten before by one. hackles, tight body, charges and barks at them but never bit. gave info for pet alliance/ rescue. -alg

# Final surrender outcome

not applicable