

Old LEASH pet surrender request form

First name

Brittany

Last name

Bastidas

Street address

312 Cornwallis ct

City

Kissimmee

Zip code

34758

Email

[miakodabastidas@gmail.com](mailto:miakodabastidas@gmail.com)

Phone

(352) 807-0056

Reason for surrender

Can no longer care for

My current living situation is...

I would rather not say.

Animal 1

Animal 1 name

Miakoda

Animal 1 species

dog

Animal 1 dog breed

Siberian huskie

Animal 1 size

31 - 40 lbs

Animal 1 gender

female

Has the animal 1 been spayed?

no

Animal 1 age

1 - 2 years

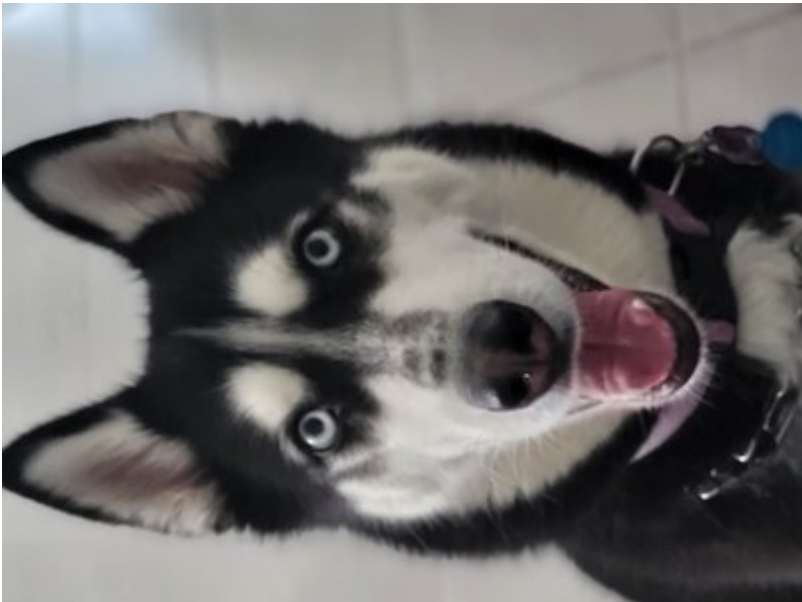
Does animal 1 have any known medical issues?

no

Has animal 1 ever bitten anybody?

no

Animal 1 photo



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Just a few more questions...

How long have you had the animals?

1 - 2 years

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

- no time for care

How we can help you keep your animals?

She requires a family that can include her in an active lifestyle

Administration

Shelter to client contact date

02/16/2023

Surrender necessary

yes

Staff member making appointment(s).

am

Send appointment email

no

Send wait time notice

yes

Multiple appointments?

no

Appointment 1

Date of appointment 1

04/11/2023

Time of appointment 1

11:00 am

Outcome data

Admin notes

2/16/23- Called the owner and she is wanting to surrender due to the do not have the time to give the dog. The owner said the have tried rehoming and have tried rescues, but the rescues are full. She also said she has smaller kids and use to have a cat and the dog does good with both. The dog per the owner is UTD on all vaccines and is health. I made the owner aware of our policies and I cannot guarantee the outcome of the animal.AM