# **Old LEASH pet surrender request form** First name Markenson Last name Jean Street address 215 chadworth drive City Kissimmee

#### Zip code

34758

#### Email

kevinsonjean345@gmail.com

#### Phone

(786) 502-6911

#### Reason for surrender

leaving

#### My current living situation is...

I have a stable home.

#### **Animal 1**

#### Animal 1 name

Red

# Animal 1 species

dog

#### Animal 1 dog breed

Pitbull

#### Animal 1 size

21 - 30 lbs

### Animal 1 gender

#### Has animal 1 been neutered?

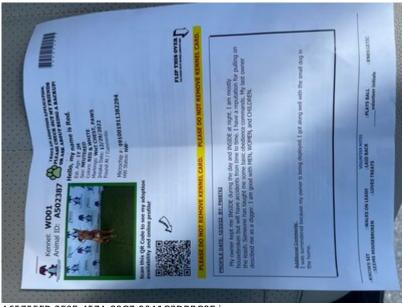
#### Animal 1 age

1 - 2 years

#### Does animal 1 have any known medical issues?

# Has animal 1 ever bitten anybody?

# Animal 1 photo



A65755FB-3F0E-457A-89C7-90A1C3DBBC8E.jpeg

# Just a few more questions...

#### How long have you had the animals?

2 - 3 months

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

- behavior
- no time for care

#### How we can help you keep your animals?

Train

#### **Administration**

#### Shelter to client contact date

02/28/2023

#### Surrender necessary

yes

# Staff member making appointment(s).

am/md

# Send appointment email

no

# Send wait time notice

no

# Multiple appointments?

no

#### **Appointment 1**

#### Date of appointment 1

02/28/2023

#### **Outcome data**

#### Call outcome

surrendered to shelter

### Final call date

02/28/2023

# Admin notes

Adopted from Orange County. Soraida is getting ahold of Orange County to have them pick up the dog. AM

# Final surrender outcome

showed at final meeting