

LEASH pet surrender request form

First name

Maria

Last name

Barcenas

Street address

2537N.Central ave

City

Kissimmee

Zip code

34741

Email

[mariavarcanas0106@gmail.com](mailto:mariavarcanas0106@gmail.com)

Phone

(407) 744-6730

Reason for surrender

We can't taker of him

My current living situation is...

I have a stable home.

Animal 1

Animal 1 name

Benji

Animal 1 species

dog

Animal 1 dog breed

Chiwawa

Animal 1 size

11 - 20 lbs

Animal 1 gender

male

Has animal 1 been neutered?

no

Animal 1 age

3 - 5 years

Has animal 1 ever bitten anybody?

no

Does animal 1 have any known medical issues?

no

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

Administration

Shelter to client contact date

03/06/2023

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

05/02/2023

Time of appointment 1

11:30 am

Outcome data

Admin notes

3/6/23- Called the owner and she only spoke Spanish. I talked to Marias daughter on the phone for translation. They can no longer have the animal due to Marias husband has a medical condition and the dog is too hyper for their family as of now. I recommended that the try to rehome through social media, family, friends, etc. I also recommended to look up rescues to rehome the dog as well. The dog has no prior bite history it is just very hyper. I explained our policies and that I cannot guarantee the outcome of the animal. AM