

Old LEASH pet surrender request form

First name

Barbara

Last name

Perez

Street address

1744 Ranger Highlands Road

City

Kissimmee

Zip code

34744

Email

[broque1983@icloud.com](mailto:broque1983@icloud.com)

Phone

(407) 963-7404

Reason for surrender

Work schedule changed and we are out of the house 12-14 hours a day. Can't keep her alone for so long daily

My current living situation is...

I have a stable home.

Animal 1

Animal 1 name

Pumpkin

Animal 1 species

dog

Animal 1 dog breed

Unknown. Mixed

Animal 1 size

51 + lbs

Animal 1 gender

female

Has the animal 1 been spayed?

yes

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?

4 months to 1 year

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

- no time for care

How we can help you keep your animals?

NA

Administration

Shelter to client contact date

03/20/2023

Surrender necessary

yes

Staff member making appointment(s).

dm

Send appointment email

no

Send wait time notice

yes

Multiple appointments?

no

Appointment 1

Date of appointment 1

05/18/2023

Time of appointment 1

11:00 am

Outcome data

Admin notes

3/22/23 called and spoke to the owner and she said she has been trying to rehome the dog and has had no luck. i told her that we need to see at the time of the appointment copies of post on social media and copies of emails to rescues. I did make her aware of our policies and that we cannot guarantee an outcome for her dog. DM