

Old LEASH pet surrender request form

First name

Maria

Last name

Tate

Street address

328 Plumwood Circle

City

Kissimmee

Zip code

34743

Email

[mariagil09@yahoo.com](mailto:mariagil09@yahoo.com)

Phone

(407) 933-4700

Reason for surrender

Unable to keep my pet my husband will be having multiple surgeries and won't have the adequate time to care for my pet

My current living situation is...

I have a stable home.

Animal 1

Animal 1 name

Chiquita

Animal 1 species

dog

Animal 1 dog breed

Shitzu

Animal 1 size

11 - 20 lbs

Animal 1 gender

female

Has the animal 1 been spayed?

yes

Animal 1 age

3 - 5 years

Does animal 1 have any known medical issues?

yes

Has animal 1 ever bitten anybody?

no

Animal 1 explain medical issues

Sensitive stomach

Animal 1 photo



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Just a few more questions...

How long have you had the animals?

3 - 5 years

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

- behavior
- has too many pets
- no time for care
- no longer want animal

How we can help you keep your animals?

I can't keep her my husband is very sick and have pending surgeries due to 3 strokes in less then 9 months and I can't keep up with her special diet and I am his only care giver I have 2 other pets and there elderly and she is very hyper and too playful I just can't keep up with all

Administration

Shelter to client contact date

03/28/2023

Surrender necessary

no

Staff member making appointment(s).

dm

Multiple appointments?

no

Outcome data

Call outcome

resolved by client

Final call date

03/28/2023

**Admin notes**

called and spoke to the owner and she has changed her mind and is going to keep the dog DM