

Old LEASH pet surrender request form

First name

Tracy

Last name

Clements

Street address

4685 Mildred Bass Rd

City

St. Cloud

Zip code

34772

Email

tracylc9@gmail.com

Phone

(689) 260-7887

Reason for surrender

Moving

My current living situation is...

I have a stable home.

I have read and understood the pet rehome statement.

yes

About the animal(s)

Number of animals to be discussed?

1

Animal 1

Animal 1 name

Noname

Animal 1 species

dog

Animal 1 dog breed

Terrier/pit mix

Animal 1 size

21 - 30 lbs

Animal 1 gender

male

Has animal 1 been neutered?

no

Animal 1 age

9 - 12 months

Does animal 1 have any known medical issues?

no

Has animal 1 ever bitten anybody?

no

Just a few more questions...

How long have you had the animals?

1 - 2 years

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

- moving

If moving, why can't pet(s) go?

The dog can't go

How we can help you keep your animals?

Not able to

Administration

Shelter to client contact date

04/26/2023

Surrender necessary

no

Staff member making appointment(s).

DM

Multiple appointments?

no

Outcome data

Call outcome

resolved by client

Final call date

04/26/2023

Admin notes

4/26/23 CALLED AND SPOKE TO THE OWNER AND SHE SAID SHE TOOK CARE OF IT AND REHOMED THE DOG ALREADY DM

Final surrender outcome

not applicable