**First name** Hernando

**Last name** Ariza

**Street address** 2759 Corbel Loop

# Old LEASH pet surrender request form

City
Kissimmee
Zip code
34746
Email
heaa01@yahoo.com
Phone
(917) 870-8562
Reason for surrender
Not able to care.
My current living situation is
I would rather not say.
I have read and understood the pet rehome statement. yes
,,,,
About the animal(s)
Number of animals to be discussed?
Animal 1
Animal 1 name Estrella
Estiella
Animal 1 species
dog
Animal 1 dog breed
terrier beagle
Animal 1 size
11 - 20 lbs
Animal 1 gender female
Temate
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 over hitten anyhedy?
Has animal 1 ever bitten anybody?
Just a few more questions
How long have you had the animals?

1 - 2 years

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

- $\bullet \ \ \text{no time for care}$
- no longer want animal

#### **Administration**

#### Shelter to client contact date

05/26/2023

#### **Surrender necessary**

no

## Staff member making appointment(s).

CVA

## Multiple appointments?

nο

## **Outcome data**

#### **Call outcome**

resolved by client

## Final call date

05/26/2023

## Admin notes

5/26/23 Called owner and was informed he found a new home for his dog. c. wildermuth

## Final surrender outcome

called and cancelled

## Close ticket

yes