

Old LEASH pet surrender request form

First name

Tonasia

Last name

Maxwell

Street address

806 Albi Court

City

Kissimmee

Zip code

34759

Email

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

Phone

(432) 349-0741

Reason for surrender

Allergic reaction

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

Hollis

Animal 1 species

dog

Animal 1 dog breed

Chichiuau

Animal 1 size

21 - 30 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?

no

Has animal 1 ever bitten anybody?

no

Animal 1 photo



20220912\_153245.jpg

Just a few more questions...

How long have you had the animals?

3 - 5 years

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

- allergies

How we can help you keep your animals?

Won't be keeping her

Administration

Shelter to client contact date

06/08/2023

Surrender necessary

no

Staff member making appointment(s).

DM

Multiple appointments?

no

Outcome data

Call outcome

resolved by client

Final call date

06/08/2023

Admin notes

6/1/23 CALLED AND LEFT VM DM  
6/8/23 i called and spoke to the owner and i informed her of our policies and she said she will no longer need our services she will rehome the dog herself DM

Final surrender outcome

not applicable

Close ticket

yes