LEASH pet surrender request form  First name  Yasmin
Last name Rivera
Street address 3822 Kyle dr
City Saint cloud
Zip code 34772
Email lr369@rocketnail.com
<b>Phone</b> (407) 744-7363
Reason for surrender Moving
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 No name
Animal 1 species cat
Animal 1 gender female
<b>Has the animal 1 been spayed?</b> no
Animal 1 age 2 - 4 months
<b>Has animal 1 ever bitten anybody?</b> no
<b>Does animal 1 have any known medical issues?</b>
Animal 2
Animal 2 name No name

## Animal 2 species

cat

Animal 2 gender

female

Has animal 2 been spayed?

no

Animal 2 age

2 - 3 months

**Animal 2 personality** 

• good with cats

Has animal 2 ever bitten anybody?

nο

Does animal 2 have any medical issues?

no

**Animal 3** 

**Animal 3 name** 

No name

**Animal 3 species** 

cat

Animal 3 gender

mala

Has the animal 3 been spayed?

no

Animal 3 age

2 - 3 months

**Animal 3 personality** 

• good with cats

Has animal 3 ever bitten anybody?

no

Does animal 3 have any medical issues?

no

Just a few more questions...

How long have you had the animals?

2 - 3 months

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

moving

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

Military

Administration

Shelter to client contact date

06/03/2023

Surrender necessary

no

Staff member making appointment(s).

DΜ

Multiple appointments?

no

Osceola County Animal Services LEASH Pet Surrender Report

### **Outcome data**

### Call outcome

resolved by client

### Final call date

06/03/2023

#### **Admin notes**

6/3/23 called and spoke to the owner. she said she is going to try and rehome them on her own, so she no longer needs our services DM

### Final surrender outcome

not applicable

# Close ticket

yes