

Old LEASH pet surrender request form

First name

Kristi

Last name

Otto

Street address

5505 South Orange Blossom Trail

City

Intercession city

Zip code

33848

Email

[ottoottobot@aol.com](mailto:ottoottobot@aol.com)

Phone

(407) 404-4902

Reason for surrender

Elderly father cannot care for the animals

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?

2

Animal 1

Animal 1 name

Bonnie

Animal 1 species

dog

Animal 1 dog breed

Unknown

Animal 1 size

11 - 20 lbs

Animal 1 gender

female

Has the animal 1 been spayed?

no

Animal 1 age

4 - 8 months

Does animal 1 have any known medical issues?

no

Has animal 1 ever bitten anybody?

no

Animal 1 photo



Screenshot\_20230616\_195234\_Messages.jpg

Animal 2

Animal 2 name

Clyde

Animal 2 species

dog

Animal 2 dog breed

Unknown

Animal 2 size

21 - 30 lbs

Animal 2 gender

male

Has animal 2 been neutered?

no

Animal 2 age

4 - 8 months

Animal 2 personality

- good with dogs

Has animal 2 ever bitten anybody?

no

Does animal 2 have any medical issues?

no

Animal 2 photo



Screenshot\_20230616\_195109\_Video Player.jpg

Just a few more questions...

How long have you had the animals?

2 - 3 months

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

- no time for care

Other reason not listed

Medical

Administration

Shelter to client contact date

06/28/2023

Surrender necessary

no

Staff member making appointment(s).

dm

Multiple appointments?

no

Outcome data

Call outcome

non responsive to contact/no show

Final call date

06/28/2023

Admin notes

6/21/23 called and left VM DM  
6/28/23 called and left vm dm

Final surrender outcome

not applicable

Close ticket

yes