

Old LEASH pet surrender request form

First name

Leah

Last name

Caldwell

Street address

12142 Picalilli st

City

Orlando

Zip code

FL

Email

llcaldwell8@gmail.com

Phone

(321) 451-4621

Reason for surrender

i can't give it the best home

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?

1

Animal 1

Animal 1 name

nipsey

Animal 1 species

dog

Animal 1 dog breed

pit bull

Animal 1 size

11 - 20 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

Animal 1 photo



lp\_image.jpeg

Just a few more questions...

How long have you had the animals?

4 months to 1 year

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

- cost of food
- cost of vet care
- has too many pets
- no longer want animal

Administration

Shelter to client contact date

06/29/2023

Surrender necessary

no

Staff member making appointment(s).

CW

Multiple appointments?

no

Outcome data

Call outcome

referred to other resources

Final call date

06/29/2023

Admin notes

6/29/23 CALLED OWNER AND INFORMED HER THAT SHE WOULD NEED TO CONTACT ORANGE COUNTY ANIMAL SERVICES AS SHE LIVES IN ORLANDO. C. WILDERMUTH

Final surrender outcome

called and cancelled

Close ticket

yes