Old LEASH pet surrender request form

First name

Jose

Last name Rivera

Street address 15249 Lafite Ln

City Clermont

Zip code 34714

Email jounsse@gmail.com

Phone (689) 245-6175

Reason for surrender small space can't take care of the dog

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 sparkle

Animal 1 species

Animal 1 dog breed beagle mix boxer

Animal 1 size 51 + lbs

Animal 1 gender female

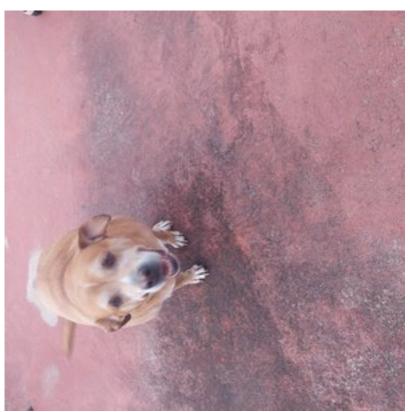
Has the animal 1 been spayed? no

Animal 1 age 3 - 5 years

Does animal 1 have any known medical issues?

Has animal 1 ever bitten anybody? no

Animal 1 photo



1687993341151708116983077321449.jpg

Just a few more questions...

How long have you had the animals?

3 - 5 years

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

- behavior
- cost of food
- cost of vet care
- no time for care

Other reason not listed

baby on the way, no space.

How we can help you keep your animals? n/a

Administration

Shelter to client contact date 07/12/2023

Surrender necessary

Staff member making appointment(s).

Multiple appointments?

no

Outcome data

Call outcome non responsive to contact/no show

Admin notes 7/12/23 duplicate DM

Final surrender outcome not applicable

Close ticket

yes