

Old LEASH pet surrender request form

First name

Brenda

Last name

Pabon Ortiz

Street address

2001 Rhine Ct

City

Kissimmee

Zip code

Florida

Email

brendapabon@yahoo.com

Phone

(321) 437-4045

Reason for surrender

I can’t take care of my cat, due for my cancer treatment

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

Max

Animal 1 species

cat

Animal 1 size

11 - 20 lbs

Animal 1 gender

female

Has the animal 1 been spayed?

yes

Animal 1 age

5 years +

Does animal 1 have any known medical issues?

no

Has animal 1 ever bitten anybody?

no

Just a few more questions...

How long have you had the animals?

5 + years

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

- allergies
- no time for care
- no longer want animal

How we can help you keep your animals?

Now the resource for me is surrender Max to the shelter..my cancer treatment is too intense and I don't have time to take care of him..

Administration

Shelter to client contact date

07/13/2023

Surrender necessary

yes

Staff member making appointment(s).

DM

Send appointment email

yes

Send wait time notice

yes

Multiple appointments?

no

Appointment 1

Date of appointment 1

09/04/2023

Time of appointment 1

01:30 pm

Outcome data

Admin notes

7/13/23 called and spoke to the owner and she said that she is going through cancer treatment and can no longer take care of the cat property . she is going to post the cat on social media and is going to reach out to rescue groups. she is aware of our policies and knows we cannot guarantee an outcome for her cat DM

Close ticket

no