

Old LEASH pet surrender request form

First name

Krystal

Last name

Colon

Street address

1477 rylee rock way

City

Kissimmee

Zip code

Fl

Email

krystal_colon1234@aol.com

Phone

(787) 601-6016

Reason for surrender

Wanting to rehome

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

Bailey

Animal 1 species

dog

Animal 1 dog breed

Pitbull mix

Animal 1 size

21 - 30 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?

no

Has animal 1 ever bitten anybody?

no

Animal 1 photo



IMG_2708.png

Just a few more questions...

How long have you had the animals?

2 - 4 weeks

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

- cost of food
- cost of vet care
- has too many pets
- insurance
- no time for care

How we can help you keep your animals?

Took in Bailey to nourish her and gain her weight back, but I can no longer care for her. Already have other dogs.

Administration

Shelter to client contact date

08/07/2023

Surrender necessary

no

Staff member making appointment(s).

DM

Multiple appointments?

no

Outcome data

Call outcome

resolved by client

Final call date

08/07/2023

Admin notes

7/27/23-Called and left VM. AM
8/7/23 called and spoke to the owner and she is going to keep the dog, so she no longer needs our services DM

Final surrender outcome

not applicable

Close ticket

yes