

## Old LEASH pet surrender request form

**First name**

Maria

**Last name**

Valentin

**Street address**

1262 sago Palm blvd

**City**

Kissimmee

**Zip code**

34741

**Email**

[lirycvalentin192@icloud.com](mailto:lirycvalentin192@icloud.com)

**Phone**

(321) 208-4275

**Reason for surrender**

my landlord won't let me

**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**

Joy

**Animal 1 species**

dog

**Animal 1 dog breed**

Chihuahua terrier

**Animal 1 size**

11 - 20 lbs

**Animal 1 gender**

male

**Has animal 1 been neutered?**

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**



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### Just a few more questions...

#### How long have you had the animals?

1 - 2 years

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

- allergies
- conflict with others
- no time for care

#### Other reason not listed

I am not allowed at home

### Administration

#### Shelter to client contact date

08/21/2023

#### Surrender necessary

yes

#### Staff member making appointment(s).

cw

#### Send appointment email

yes

#### Send wait time notice

yes

#### Multiple appointments?

no

### Appointment 1

#### Date of appointment 1

09/12/2023

#### Time of appointment 1

11:30 am

### Outcome data

#### Admin notes

8/21/23 Called owner who spoke spanish. Kia came in and translated for me. The owner was advised of the steps she will need to take before bringing in the dog along with all documented proof. Owner was also informed of our polices and procedures. C. Wildermuth

#### Close ticket

no