

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