

Old LEASH pet surrender request form

First name

Dian

Last name

Leon

Street address

2834 common crane ct

City

St cloud

Zip code

34773

Email

dianleon17@gmail.com

Phone

(305) 401-6829

Reason for surrender

We have a baby, and the Dog is being territorial, my wife dies not feel safe with the baby and Dog

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

Hope

Animal 1 species

dog

Animal 1 dog breed

American Bulldog

Animal 1 size

21 - 30 lbs

Animal 1 gender

female

Has the animal 1 been spayed?

yes

Animal 1 age

1 - 2 years

Does animal 1 have any known medical issues?

no

Has animal 1 ever bitten anybody?

no

Animal 1 photo



SmartSelect_20230812_120229_Instagram.jpg

Just a few more questions...

How long have you had the animals?

1 - 2 years

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

- behavior

Other reason not listed

No

How we can help you keep your animals?

You can't, thank you ☹️

Administration

Shelter to client contact date

08/18/2023

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

09/26/2023

Time of appointment 1

11:00 am

Outcome data

Admin notes

8/18/23 called and spoke to the owner and he said the dog is showing her teeth at the family members and him and his wife just had, and baby and they are concerned that the dog will do the same thing to the baby. he does not want the dog 300. he is going to ask around and contact some rescue groups to see if they can help. he is aware of our polices and knows we cannot guarantee an outcome for his dog DM.

Close ticket

no