

Old LEASH pet surrender request form

First name

Amanda

Last name

Matos

Street address

1710 town park court

City

Saint Cloud

Zip code

34769

Email

mandiiixx3@gmail.com

Phone

(718) 690-8341

Reason for surrender

Moving and can't have in the house

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

Koba

Animal 1 species

dog

Animal 1 dog breed

Pit bull

Animal 1 size

41 - 50 lbs

Animal 1 color

brown white

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?

3 - 5 years

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

- moving

If moving, why can't pet(s) go?

Pets aren't accepted

How we can help you keep your animals?

Hold him until I move ?

Administration

Shelter to client contact date

08/31/2023

Follow - up required

yes

Follow up notes/actions needed 1

8/31/23 Left a VM to call back CH 9/7/23 left vm to call by 5pm today or the request would be closed. CH

Multiple appointments?

no

Outcome data

Call outcome

non responsive to contact/no show

Final call date

09/08/2023

Admin notes

No response to calls.

Close ticket

yes