

## Old LEASH pet surrender request form

**First name**

NEELAWATEE

**Last name**

SINGH

**Street address**

2612 BELMONT PLACE

**City**

KISSIMMEE

**Zip code**

34744

**Email**

[lalita49@earthlink.net](mailto:lalita49@earthlink.net)

**Phone**

(407) 348-4400

**Reason for surrender**

I have become severely allergic to my cat. I did allergy test and it was positive for cats. I am breaking out in bad rashes and my lips are swelling real big. I have to take Benadryl daily but I have to stop because it is interfering with my high blood pressure and diabetes medicine. I am very sad to give her away but I have no choice. My health is very important. I am a senior and it is very hard for me. She is up to date with her shots.

**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**

Ginger

**Animal 1 species**

cat

**Animal 1 color**

Torti and white

**Animal 1 gender**

female

**Has the animal 1 been spayed?**

yes

**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**



GINGER.png

### Just a few more questions...

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

3 - 5 years

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

- allergies

#### How we can help you keep your animals?

It is impossible to keep her because I am getting too sick. It hurts a lot to part with her.

### Administration

#### Shelter to client contact date

09/01/2023

#### Follow - up required

no

#### Surrender necessary

yes

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

Hardy

#### Send appointment email

yes

#### Send wait time notice

yes

#### Multiple appointments?

no

### Appointment 1

#### Date of appointment 1

11/06/2023

#### Time of appointment 1

04:00 pm

### Outcome data

#### Call outcome

appointment made

#### Close ticket

no