Old LEASH pet surrender request form

First name

Tahimy

Last name buitrago

Street address

6137 buck hill dr

City polk city

Zip code

33868

Email tahimybuitrago@gmail.com

Phone (407) 219-2438

Reason for surrender

Destructive 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 Canoli

Animal 1 species

Animal 1 dog breed

Animal 1 size

Animal 1 color white

Animal 1 gender male

Has animal 1 been neutered? yes

Animal 1 age 1 - 2 years

Does animal 1 have any known medical issues?

Has animal 1 ever bitten anybody?

no

Just a few more questions...

How long have you had the animals?

2 - 3 months

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

- behavior
- no longer want animal

Administration

Shelter to client contact date

09/07/2023

Follow - up required

no

Follow up notes/actions needed 1

9/7/23 Sent Email ... VM was not set up.... Explained they must contact the county they live in. CH

Surrender necessary

no

Staff member making appointment(s).

Hardy

Multiple appointments?

no

Outcome data

Call outcome referred to other resources

Final call date

09/07/2023

Admin notes 9/7/23 Sent Email Explaining they live in another county and they have to contact the county they live in. CH

Final surrender outcome

called and cancelled

Close ticket

yes