

Old LEASH pet surrender request form

First name

Kevin

Last name

Hernandez

Street address

7085 branch

City

St. Cloud

Zip code

34771

Email

supremetransporation407@yahoo.com

Phone

(407) 244-0509

Reason for surrender

Moving/ financial

My current living situation is...

I would rather not say.

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

Nala

Animal 1 species

dog

Animal 1 dog breed

American Stratford terrier

Animal 1 size

51 + lbs

Animal 1 color

Dawn

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



IMG_2952.jpeg

Just a few more questions...

How long have you had the animals?

3 - 5 years

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

- ☒ moving
- ☒ no time for care
- ☒ no longer want animal

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

Doesn't accept breed/ extra financial to have a pet

Administration

Shelter to client contact date

10/13/2023

Follow - up required

no

Surrender necessary

yes

Staff member making appointment(s).

c.wildermuth

Send appointment email

yes

Send wait time notice

yes

Multiple appointments?

no

Appointment 1

Date of appointment 1

02/15/2024

Time of appointment 1

10:00 am

Outcome data

Call outcome

appointment made

Final call date

10/13/2023

Admin notes

10/13/23 Called owner and informed him of our policies and procedures. Owner stated he has been attempting to rehome the pet on his own with no luck. C. Wildermuth

Close ticket

no