

Old LEASH pet surrender request form

First name

Tiffany

Last name

Johnson

Street address

2237 Wood Stork Lane

City

St Cloud

Zip code

34771

Email

tiffanylong123@icloud.com

Phone

(954) 868-4338

Reason for surrender

Unable to take care of 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

Coco

Animal 1 species

dog

Animal 1 dog breed

Husky lab pit mixture

Animal 1 size

41 - 50 lbs

Animal 1 color

Brown/black

Animal 1 gender

male

Has animal 1 been neutered?

no

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



IMG_9537.jpeg

Just a few more questions...

How long have you had the animals?

4 months to 1 year

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

- behavior
- no time for care

How we can help you keep your animals?

No, I have to pay for damages done to my house. I am no longer able to take care of him unfortunately.

Administration

Shelter to client contact date

10/23/2023

Follow - up required

yes

Follow up notes/actions needed 1

left VM to call back

Agent initials follow up 1

Hardy

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

01/29/2024

Time of appointment 1

01:00 pm

Outcome data

Call outcome

appointment made

Final call date

10/23/2023

Close ticket

no