

Old LEASH pet surrender request form

First name

Michael

Last name

Starnes

Street address

4104 W Vine St

City

Kissimmee

Zip code

34742

Email

goldbcrash02@yahoo.com

Phone

(407) 912-5355

Reason for surrender

Homeless

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

Snickers

Animal 1 species

dog

Animal 1 dog breed

Don't know

Animal 1 size

31 - 40 lbs

Animal 1 color

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



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Just a few more questions...

How long have you had the animals?

1 - 2 years

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

- homeless

How we can help you keep your animals?

Can't have the dog in the hotel

Administration

Shelter to client contact date

10/26/2023

Follow - up required

no

Surrender necessary

no

Staff member making appointment(s).

hardy

Multiple appointments?

no

Outcome data

Call outcome

resolved by client

Final call date

10/26/2023

Admin notes

10/26 Said they had to get rid of the dog now or be out of the Hotel. Did not want the appointment. CH

Final surrender outcome

resolved by client

Close ticket

yes