Old LEASH pet surrender request form

First name

Jaqueline

Last name

Lingard

Street address

117 S Roma Way

City Kissimmee

Zip code

34746

Email lingardjaqueline9@gmail.com

Phone (407) 486-1647

Reason for surrender

we were watching the dog for someone while they moved to GA. they never came back for her. however our landlord sold the house and we moved in with family. we cannot keep her.

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 Aseys

Animal 1 species

Animal 1 dog breed Pit Bull Mix

Animal 1 size

Animal 1 color Brown

Animal 1 gender female

Has the animal 1 been spayed? yes

Animal 1 age 5 years +

Does animal 1 have any known medical issues? no

Has animal 1 ever bitten anybody? I do not know

Just a few more questions...

How long have you had the animals?

1 - 2 years

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

• homeless

Other reason not listed we are currently living with family.

Administration

Shelter to client contact date 11/01/2023

Follow - up required yes

Follow up notes/actions needed 1 left VM to call back

Agent initials follow up 1 Hardy

Multiple appointments?

Outcome data

Call outcome non responsive to contact/no show

Final call date 01/12/2024

Final surrender outcome not applicable

Close ticket yes