

Old LEASH pet surrender request form

First name

Vianney

Last name

Telleria

Street address

5469 Marylebone Drive

City

Saint Cloud

Zip code

34771

Email

[vianney.telleria@gmail.com](mailto:vianney.telleria@gmail.com)

Phone

(407) 552-2150

Reason for surrender

Allergies due to my pet

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

cat

Animal 1 size

11 - 20 lbs

Animal 1 color

Brown

Animal 1 gender

male

Has animal 1 been neutered?

yes

Animal 1 age

3 - 5 years

Does animal 1 have any known medical issues?

no

Has animal 1 ever bitten anybody?

no

Just a few more questions...

How long have you had the animals?

3 - 5 years

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

- allergies
- no time for care

Administration

Shelter to client contact date

11/07/2023

Follow - up required

no

Surrender necessary

no

Multiple appointments?

no

Outcome data

Call outcome

non responsive to contact/no show

Final call date

01/12/2024

Admin notes

11/7/23 cALLED LEFT VM FOR CALL BACK. CWILDERMUTH

Final surrender outcome

not applicable

Close ticket

yes