

Old LEASH pet surrender request form

First name

Brittany

Last name

Bowens

Street address

4207 Lugano Court

City

Kissimmee

Zip code

34746

Email

[bowensb816@gmail.com](mailto:bowensb816@gmail.com)

Phone

(407) 300-5594

Reason for surrender

Time, behavior, resources

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

Ralo

Animal 1 species

dog

Animal 1 dog breed

Unknown

Animal 1 size

11 - 20 lbs

Animal 1 color

Tan

Animal 1 gender

male

Has animal 1 been neutered?

no

Animal 1 age

4 - 8 months

Does animal 1 have any known medical issues?

no

Has animal 1 ever bitten anybody?

yes

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
- cost of food
- cost of vet care
- conflict with others
- no time for care

Administration

Shelter to client contact date

01/10/2024

Follow - up required

no

Surrender necessary

no

Staff member making appointment(s).

Hardy

Multiple appointments?

no

Outcome data

Call outcome

referred to other resources

Final call date

01/10/2024

Admin notes

Email Sent ...

Good Day,

I am reaching out to you because you filed a request form on our website to surrender your pet. I am writing to inform you we’ve temporarily suspended our animal intakes due to upcoming construction on our facility. At this time, we are uncertain when we will lift this suspension.

We recommend using social media, animal rescues, or other means for rehoming your pet.

Final surrender outcome

not applicable

Close ticket

yes