

Old LEASH pet surrender request form

First name

Arlene

Last name

Helmus

Street address

2920 Flora Ridge Circle, 315

City

Kissimmee

Zip code

34741

Email

ahsr1936@gmail.com

Phone

(303) 880-2620

Reason for surrender

Moved into a long term care facility that does not allow pets

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

Sweet Pea

Animal 1 species

cat

Animal 1 size

11 - 20 lbs

Animal 1 color

Grey

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?

no

Animal 1 photo



Cat Photo.jpg

Just a few more questions...

How long have you had the animals?

5 + years

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

- moving

Other reason not listed

Moved into a long term car facility that does not allow animals

If moving, why can't pet(s) go?

Not allowed around other patients/residents

How we can help you keep your animals?

Would love to keep her as she is the sweetest cat and my baby but can no longer care for her and she is not allowed in the facility.

Administration

Shelter to client contact date

01/19/2024

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

01/19/2024

Final surrender outcome

resolved by client

Close ticket

yes