# Old LEASH pet surrender request form

First name

Diego

Last name Gonzalez

**Street address** 1154 seaside mist trail

**City** Kissimmee

**Zip code** 34747

51717

Email diego.alejandrog@gmail.com

**Phone** (407) 717-4593

**Reason for surrender** Dog bite

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 Toronto

Animal 1 species

Animal 1 dog breed Labradoodle

Animal 1 size

Animal 1 color Chocolate

Animal 1 gender male

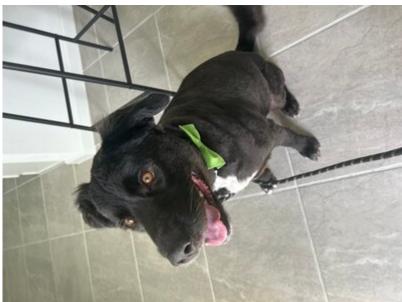
Has animal 1 been neutered? yes

Animal 1 age 3 - 5 years

Does animal 1 have any known medical issues?

Has animal 1 ever bitten anybody? yes

#### Animal 1 photo



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### Just a few more questions...

#### How long have you had the animals?

3 - 5 years

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

- behavior
- no longer want animal

## Other reason not listed

Bite

How we can help you keep your animals? Nothing

### Administration

Shelter to client contact date 02/21/2024

Follow - up required

Surrender necessary

Staff member making appointment(s). Hardy

Multiple appointments? no

### **Outcome data**

Call outcome referred to other resources

**Final call date** 02/21/2024

#### 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.

Due to the dogs behavior the only service we could provide is Euthanasia. If you choose that, you can call during normal business hours to make an appointment.

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

## Final surrender outcome

not applicable

### Close ticket

yes