

Old LEASH pet surrender request form

First name

Norma

Last name

Delacruz

Street address

5333 Jubiloso Drive

City

St Cloud

Zip code

34771

Email

damara111@aol.com

Phone

(347) 279-8340

Reason for surrender

Parents are too old to take care of her and she is really aggressive

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

Luna

Animal 1 species

dog

Animal 1 dog breed

Shizu

Animal 1 color

White

Animal 1 gender

female

Has the animal 1 been spayed?

no

Animal 1 age

5 years +

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?

5 + years

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

- allergies

Other reason not listed

can't care for her no more and is a bitter

Administration

Shelter to client contact date

04/03/2024

Follow - up required

no

Surrender necessary

yes

Staff member making appointment(s).

Hardy

Send appointment email

yes

Send wait time notice

yes

Multiple appointments?

no

Appointment 1

Date of appointment 1

04/09/2024

Time of appointment 1

10:00 am

Outcome data

Call outcome

euthanasia deemed necessary

Final call date

04/03/2024

Close ticket

no