

Old LEASH pet surrender request form

First name

Doris

Last name

Hernandez

Street address

25 lake villa way

City

Kissimmee

Zip code

34743

Email

dorisroses11@gmail.com

Phone

(407) 731-6037

Reason for surrender

I can have pets in my new apartment

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

cat

Animal 1 size

11 - 20 lbs

Animal 1 color

Gris

Animal 1 gender

female

Has the animal 1 been spayed?

no

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.

- moving

Other reason not listed

Don't allow pets where I move in

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

Don't allow pets

Administration

Shelter to client contact date

04/04/2024

Follow - up required

yes

Follow up notes/actions needed 1

Left VM to call back

Agent initials follow up 1

Hardy

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

05/14/2024

Time of appointment 1

04:00 pm

Outcome data

Call outcome

appointment made

Final call date

04/04/2024

Close ticket

no