

Old LEASH pet surrender request form

First name

Cesar

Last name

Montes

Street address

212 Applewood Ct

City

Kissimmee

Zip code

34743

Email

Juniboy2433@gmail.com

Phone

(407) 334-3251

Reason for surrender

Do not have time for him and currently have no where to stay with dog

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

Maxi

Animal 1 species

dog

Animal 1 dog breed

German shepherd

Animal 1 size

51 + lbs

Animal 1 color

Black and tan

Animal 1 gender

male

Has animal 1 been neutered?

no

Animal 1 age

3 - 5 years

Does animal 1 have any known medical issues?

no

Has animal 1 ever bitten anybody?

no

Animal 1 photo



448.jpeg

Just a few more questions...

How long have you had the animals?

3 - 5 years

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

- moving
- no time for care

Administration

Shelter to client contact date

04/04/2024

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

05/14/2024

Time of appointment 1

10:00 am

Outcome data

Call outcome

appointment made

Final call date

04/04/2024

Close ticket

no