

Old LEASH pet surrender request form

First name

Efrain

Last name

Acevedo

Street address

1747 King Edward Dr

City

Kissimmee

Zip code

34744

Email

eacevedow@gmail.com

Phone

(407) 508-9353

Reason for surrender

No time for them

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?

2

Animal 1

Animal 1 name

Rocky

Animal 1 species

dog

Animal 1 dog breed

American pitbull terrier

Animal 1 size

51 + lbs

Animal 1 color

Light grey and white

Animal 1 gender

male

Has animal 1 been neutered?

yes

Animal 1 age

5 years +

Does animal 1 have any known medical issues?

no

Has animal 1 ever bitten anybody?

no

Animal 2

Animal 2 name

Luna

Animal 2 species

dog

Animal 2 dog breed

American pit bull terrier

Animal 2 size

21 - 30 lbs

Animal 2 color

Light brown and white

Animal 2 gender

female

Has animal 2 been spayed?

no

Animal 2 age

4 - 8 months

Animal 2 personality

- good with dogs/cats
- good with dogs
- good with cats
- good with small animals
- good with small children

Has animal 2 ever bitten anybody?

no

Does animal 2 have any medical issues?

no

Just a few more questions...

How long have you had the animals?

5 + years

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

- no time for care

Administration

Shelter to client contact date

04/09/2024

Follow - up required

no

Agent initials follow up 1

la

Agent initials follow up 2

la

Surrender necessary

yes

Staff member making appointment(s).

la

Send appointment email

yes

Send wait time notice

yes

Multiple appointments?

no

Appointment 1

Date of appointment 1

05/27/2024

Time of appointment 1

12:00 pm

Outcome data

Call outcome

appointment made

Final call date

04/09/2024

Final surrender outcome

resolved by client

Close ticket

yes