

Old LEASH pet surrender request form

First name

BettyAnn

Last name

De La Torre

Street address

1771 Bright Sky Drive

City

Kissimmee

Zip code

34744

Email

bettyanndelatorre@yahoo.com

Phone

(407) 744-6158

Reason for surrender

Child severally allergic

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

Kaleigha "Keke"

Animal 1 species

dog

Animal 1 dog breed

Shitzu mix

Animal 1 size

21 - 30 lbs

Animal 1 color

White/brown

Animal 1 gender

female

Has the animal 1 been spayed?

no

Animal 1 age

5 years +

Does animal 1 have any known medical issues?

yes

Has animal 1 ever bitten anybody?

no

Animal 1 explain medical issues

Painful hip due to being overweight

Animal 1 photo



20230810_214138.jpg

Just a few more questions...

How long have you had the animals?

4 months to 1 year

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

- allergies

Administration

Shelter to client contact date

04/09/2024

Follow - up required

yes

Follow up notes/actions needed 1

no answer/ the vm not setup

Agent initials follow up 1

leonor

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

05/30/2024

Time of appointment 1

10:00 am

Outcome data

Call outcome

appointment made

Final call date

04/09/2024

Admin notes

4/0924 LEFT VM DM

Close ticket

no