LEASH pet surrender request form

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First name Leslie
Last name Soto
Street address 4579 Casablanca Ave
City Kissimmee
Zip code 34746
Email lesliesoto89@hotmail.com
Phone (407) 520-2115
Reason for surrender health reasons
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?
Animal 1
Animal 1 name Lexi
Animal 1 species dog
Animal 1 dog breed boxer
Animal 1 size 51 + lbs
Animal 1 color fawn
Animal 1 gender female
Has the animal 1 been spayed? yes
Animal 1 age 5 years +
Has animal 1 ever bitten anybody?

Does animal 1 have any known medical issues?

Animal 1 photo



WhatsApp Image 2024-04-05 at 21.39.21.jpeg

Just a few more questions...

How long have you had the animals?

5 + years

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

- allergies
- no time for care

Other reason not listed

other health reasons

How we can help you keep your animals?

I can no longer keep her. I've already tried re-homing but no one is interested.

Administration

Shelter to client contact date

04/09/2024

Follow - up required

no

Follow up notes/actions needed ${\bf 1}$

SENT EMAIL NO PHONE NUMBER

Agent initials follow up 1

dm

Surrender necessary

ves

Staff member making appointment(s).

Dm

Send appointment email

yes

Send wait time notice

VAS

Multiple appointments?

nΛ

Appointment 1

Date of appointment 1

06/05/2024

Time of appointment 1

10:00 am

Outcome data

Call outcome

appointment made

Final call date

04/09/2024

Admin notes

4/09/24 SENT EMAIL ASKING FOR A PHONE NUMBER SO WE CAN CONTACT THE OWNER \mbox{DM}

4/9/24 owner emailed back with a phone number. she said she had shoulder surgery and cannot walk the dog anymore, along with her nephew just moved in with her and he is allergic to the dog. she has posted the dog on social media and has contacted rescue groups but has had no luck. she is aware of our policies and knows we cannot guarantee an outcome for her dog. DM

Close ticket

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