

Old LEASH pet surrender request form

First name

Pedro

Last name

Serrano

Street address

680 Academy Dr

City

Kissimmee

Zip code

34744

Email

[star.valley@live.com](mailto:star.valley@live.com)

Phone

(407) 202-3676

Reason for surrender

Unable to take care of the dog. No time.

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

Peaches

Animal 1 species

dog

Animal 1 dog breed

Australian shepherd mix

Animal 1 size

11 - 20 lbs

Animal 1 color

Brown

Animal 1 gender

female

Has the animal 1 been spayed?

no

Animal 1 age

1 - 2 years

Does animal 1 have any known medical issues?

no

Has animal 1 ever bitten anybody?

no

Animal 1 photo



IMG\_8021.jpeg

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.

- no time for care

How we can help you keep your animals?

You can't.

Administration

Shelter to client contact date

04/16/2024

Follow - up required

yes

Follow up notes/actions needed 1

leave a message to call us back

Agent initials follow up 1

LA

Multiple appointments?

no

Outcome data

Close ticket

no