# **Old LEASH pet surrender request form**

### First name

Lahisha

Last name

Santiago

Street address

4431 Canopy Ct

**City** Kissimmee

**Zip code** 34758

Email lahishasantiago16@yahoo.com

**Phone** (407) 693-7173

Reason for surrender I took her in because her owner died but my landlord does not allow pet so I can no longer keep her

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 Mia

Animal 1 species

Animal 1 dog breed Jack Russell

Animal 1 size 21 - 30 lbs

Animal 1 color Brown

Animal 1 gender female

Has the animal 1 been spayed? yes

Animal 1 age 1 - 2 years

Does animal 1 have any known medical issues?

Has animal 1 ever bitten anybody? I do not know

#### Animal 1 photo



IMG\_9425.jpeg

#### Just a few more questions...

#### How long have you had the animals?

2 - 3 months

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

- behavior
- conflict with others

#### Administration

Shelter to client contact date 05/07/2024

Follow - up required yes

Follow up notes/actions needed 1 left VM to call back

Agent initials follow up 1 Hardy

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 07/30/2024

Time of appointment 1 04:00 pm

Outcome data

Osceola County Animal Services LEASH Pet Surrender Report

# Call outcome

appointment made

# **Final call date** 05/08/2024

#### Close ticket

no