

Old LEASH pet surrender request form

First name

Amber

Last name

Flores

Street address

1298 Sky Lakes Dr

City

Saint Cloud

Zip code

34769

Email

amberflowers\_00@yahoo.com

Phone

(432) 208-5511

Reason for surrender

children allergies

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

Dexter

Animal 1 species

dog

Animal 1 dog breed

bull terrier/ american bulldog

Animal 1 size

51 + lbs

Animal 1 color

white/brown

Animal 1 gender

male

Has animal 1 been neutered?

no

Animal 1 age

3 - 5 years

Does animal 1 have any known medical issues?

no

Has animal 1 ever bitten anybody?

no

Animal 1 photo



IMG\_8563.jpeg

Just a few more questions...

How long have you had the animals?

3 - 5 years

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

- allergies

How we can help you keep your animals?

Weve tried keeping him and doing everything we can to manage our kid’s allergies with no avail. His allergies are still as bad, and Dexter spends little to no time indoors unless it’s for bed time, which he’s not a fan of. Our plan was never to have an outdoor dog and there’s not another option for us at this point and Dexter does not enjoy that either.

Administration

Shelter to client contact date

05/08/2024

Follow - up required

no

Follow up notes/actions needed 1

she schedule appt w/pet alliance

Agent initials follow up 1

LA

Surrender necessary

no

Staff member making appointment(s).

no

Multiple appointments?

no

Outcome data

Call outcome

resolved by client

Final call date

05/08/2024

Admin notes

05-08-24 owner schedule appt w/ pet alliance request cancel the request //LA

Final surrender outcome

resolved by client

Close ticket

yes