

Old LEASH pet surrender request form

First name

Devana

Last name

O'Brien

Street address

1785 Petiole Place

City

Kissimmee

Zip code

34744

Email

devanaljackson@gmail.com

Phone

(440) 214-0478

Reason for surrender

Aggressive behavior. Going to lose home insurance.

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

Rosie

Animal 1 species

dog

Animal 1 dog breed

American akita

Animal 1 size

51 + lbs

Animal 1 color

White and black

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?

no

Has animal 1 ever bitten anybody?

yes

Animal 1 photo



IMG_2501.jpeg

Just a few more questions...

How long have you had the animals?

1 - 2 years

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

- allergies
- insurance
- conflict with others
- no time for care
- no longer want animal

How we can help you keep your animals?

There is no desire to keep this dog. I have tried reaching out to friends and posted on adoption sites. Surrendering her is the last option.

Administration

Shelter to client contact date

05/17/2024

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

12:30 pm

Outcome data

Call outcome

appointment made

Final call date

05/17/2024

Close ticket

no