# Old LEASH pet surrender request form

**First name** Elaine

**Last name** Gonzalez

**Street address**3110 TURNBERRY BLVD

JIIO FORMBERNY BEVB
City KISSIMMEE
Zip code 34744
Email elainemarina24@yahoo.com
<b>Phone</b> (845) 793-4617
Reason for surrender Unable to care for pet
My current living situation is I would rather not say.
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 Bentley
Animal 1 species dog
Animal 1 dog breed American Bully
Animal 1 size 51 + lbs
Animal 1 color Grey
Animal 1 gender male
Has animal 1 been neutered?
Animal 1 age 5 years +
<b>Does animal 1 have any known medical issues?</b>

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

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

5 + years

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

- cost of food
- cost of vet care
- no time for care

#### How we can help you keep your animals?

No time for care

#### **Administration**

#### Shelter to client contact date

05/16/2024

#### Follow - up required

yes

#### Follow up notes/actions needed 1

leave a message

## Agent initials follow up 1

la

#### Follow up notes/actions needed 2

leave a message to call us back

#### **Surrender necessary**

yes

## Staff member making appointment(s).

yes

## Send appointment email

ves

# Send wait time notice

yes

### Multiple appointments?

no

# Appointment 1

## Date of appointment 1

08/14/2024

## Time of appointment 1

10:00 am

# Outcome data

## Final call date

05/16/2024

## Admin notes

05-16-24 owner call back schedule appt 08-14-24 at 10:00am//la 05-16-24 leave a message to call us back//LA

## Final surrender outcome

not applicable

## Close ticket

yes