

Old LEASH pet surrender request form

First name

Jasmine

Last name

Perry

Street address

2875 maingate village cir apt 109

City

Kissimmee

Zip code

34747

Email

jasminek1805@gmail.com

Phone

(407) 870-3322

Reason for surrender

My apartment complex told me I have to

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

Stitch

Animal 1 species

dog

Animal 1 dog breed

Australian shepherd

Animal 1 size

31 - 40 lbs

Animal 1 color

Black white and grey

Animal 1 gender

male

Has animal 1 been neutered?

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_1162.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
- ☒ behavior
- ☒ cost of vet care
- ☒ moving
- ☒ no time for care

If moving, why can't pet(s) go?

Not pet friendly

Administration

Shelter to client contact date

06/27/2024

Follow - up required

yes

Follow up notes/actions needed 1

left VM to call

Agent initials follow up 1

Hardy

Follow up notes/actions needed 2

leave a voice message

Agent initials follow up 2

la

Surrender necessary

no

Staff member making appointment(s).

no

Multiple appointments?

no

Outcome data

Final call date

07/03/2024

Admin notes

07-03-24 leave a voice message requesting to call us back or the request is going to be cancel ///

Close ticket

yes