

Old LEASH pet surrender request form

First name

Taylor

Last name

Cousins

Street address

4519 Mesa Verde Dr

City

Saint Cloud

Zip code

34769

Email

cousins.taylor3001@gmail.com

Phone

(407) 361-2053

Reason for surrender

change in living situation, owner of rental is deciding to sell and the family i am moving to is not allowing him and I have nowhere else to go.

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?

1

Animal 1

Animal 1 name

Levi

Animal 1 species

dog

Animal 1 dog breed

catahoula curr mix

Animal 1 size

51 + lbs

Animal 1 color

blue merle

Animal 1 gender

male

Has animal 1 been neutered?

yes

Animal 1 age

5 years +

Does animal 1 have any known medical issues?

yes

Has animal 1 ever bitten anybody?

no

Animal 1 explain medical issues

anxiety and treated heart worms, microflaria tested negative

Animal 1 photo

Levi\_CatahoulaCurr.pdf

Just a few more questions...

How long have you had the animals?

4 months to 1 year

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

- moving
- no time for care

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

Family will not allow me to have any pets of any kind. Other living options are out of cost range with Levi accounted.

Administration

Shelter to client contact date

06/27/2024

Follow - up required

no

Follow up notes/actions needed 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

09/25/2024

Time of appointment 1

04:00 pm

Outcome data

Call outcome

appointment made

Final call date

06/27/2024

Admin notes

Brining in dog for Euthanasia. She decided after she made appointment CH

Final surrender outcome

resolved by client

Close ticket

yes