## **Old LEASH pet surrender request form**

First name

Ashley

Last name

Boyle

Street address

1836 overcup ave

**City** Saint cloud

Zip code

34771

Email

ashleyboyle1991@yahoo.com

**Phone** (347) 304-0790

#### **Reason for surrender** Cannot keep my dog because it's causing my son to get extremely sick with allergies I've tried to re home but have had no luck

calling keep my dog because it's causing my son to get extremely sick with allergies i ve thed to re nome but hav

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?

## Animal 1

**Animal 1 name** Charlie

Animal 1 species

Animal 1 dog breed Corgi

Animal 1 size

Animal 1 color Black / brown

Animal 1 gender male

Has animal 1 been neutered?

Animal 1 age 1 - 2 years

Does animal 1 have any known medical issues?

Has animal 1 ever bitten anybody?

no

#### Animal 1 photo



IMG\_0153.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

#### Administration

Shelter to client contact date 07/02/2024

Follow - up required yes

Follow up notes/actions needed 1 LINE BUSY / UNABLE TO MAKE CONTACT

Agent initials follow up 1 TF

Follow up notes/actions needed 2 client found a place

Agent initials follow up 2 la

Surrender necessary

no

Staff member making appointment(s). no

#### Multiple appointments?

no

## Outcome data

# Call outcome

resolved by client

# Final call date

07/09/2024

## Final surrender outcome

resolved by client

## Close ticket

yes