

Old LEASH pet surrender request form

First name

MOHAMED

Last name

SALEM

Street address

3585 VEGA CREEK DR

City

SAINT CLOUD

Zip code

34772

Email

m.salem1096@gmail.com

Phone

(518) 502-6220

Reason for surrender

Started to work long hours no time to take care of him

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

Rocky

Animal 1 species

dog

Animal 1 dog breed

Husky

Animal 1 size

31 - 40 lbs

Animal 1 color

white/Black

Animal 1 gender

male

Has animal 1 been neutered?

yes

Animal 1 age

4 - 8 months

Does animal 1 have any known medical issues?

no

Has animal 1 ever bitten anybody?

no

Animal 1 photo



448403206_855682303072945_2357297053163123867_n.jpg

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?

moving into small apartment with roommates refusing pets

How we can help you keep your animals?

The only way to help is to find him a caring home to take care of him better than me.

Administration

Shelter to client contact date

07/03/2024

Follow - up required

yes

Follow up notes/actions needed 1

left VM to call ... looking to schedule 7/18 because it is a pup

Agent initials follow up 1

Hardy

Follow up notes/actions needed 2

already rehome

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

Admin notes

07-09-24 client rehome the pet //la

Final surrender outcome

resolved by client

Close ticket

yes