

Old LEASH pet surrender request form

First name

Larissa

Last name

Hepler

Street address

267 pine valley road

City

Saint Cloud

Zip code

34769

Email

Larissac.hepler@gmail.com

Phone

(407) 749-2146

Reason for surrender

Severe allergies

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

Ezra

Animal 1 species

dog

Animal 1 dog breed

Pitbull black mouth cur mix

Animal 1 size

41 - 50 lbs

Animal 1 color

Tan and black

Animal 1 gender

female

Has the animal 1 been spayed?

yes

Animal 1 age

3 - 5 years

Does animal 1 have any known medical issues?

yes

Has animal 1 ever bitten anybody?

no

Animal 1 explain medical issues

Allergies to beef and can't chew hard toys

Just a few more questions...

How long have you had the animals?

3 - 5 years

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

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

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

Pets not allowed

How we can help you keep your animals?

Had a baby and baby is severely allergic.

Administration

Shelter to client contact date

07/09/2024

Follow - up required

no

Follow up notes/actions needed 1

duplicate

Agent initials follow up 1

la

Surrender necessary

no

Multiple appointments?

no

Outcome data

Call outcome

appointment made

Final call date

07/09/2024

Final surrender outcome

not applicable

Close ticket

yes