

City of Danville
Animal Control Officer / Public Animal Shelter

ANIMAL CUSTODY RECORD

ANIMAL ID: 40782 CUSTODY DATE MM/DD/YY: 6-3-25 TIME: AM/PM

REASON FOR CUSTODY (mark appropriate box) **LOCATION WHERE CUSTODY WAS TAKEN**

Stray / At Large
 Owner Surrender
 Seized
 Bite Case Quarantine
 Transfer from Another Releasing Agency
 Virginia
 Other:
Name: Out-of-State

DAHS

OWNER'S NAME & ADDRESS (if known) **ADDITIONAL INFORMATION**

[Redacted Owner Name and Address]

ANIMAL DESCRIPTION

SPECIES: Feline Canine
BREED: DSH COLOR / MARKINGS: Black SEX: Male Female Altered: Y N Unk
Approximate AGE: 6 weeks YR MO
Approximate WEIGHT: 2 LB
OTHER:

ANIMAL IDENTIFICATION (Check for all types on animal and complete all boxes. If not found, write NO)

License Tag (Number - Details)	Rabies Tag (Number - Details)	Tattoo (Describe)	Collar (Describe - Color, Type, etc.)	Microchip or Other Identification (Describe - Details)
None	None	None	None	Scan: 6-3-25 Scan: 6-4-25 NO Det.

CUSTODY RECORD PREPARED BY

Signature: [Redacted] DATE: (MM/DD/YY) 06-03-25

RIGHTFUL OWNER SURRENDER STATEMENT

I am the rightful owner of this animal. I surrender all property rights in this animal. No other person has a right of property in this animal. I understand that this animal may be immediately euthanized or otherwise disposed in accordance with Virginia Code, Title 3.2, Ch. 65. If I want the animal back, I will follow adoption procedures.

SIGNATURE: [Redacted]

DISPOSITION OF ANIMAL Euth **HOLDING PERIOD EXPIRES ON (Date):** 6-4-25

DATE: (MM/DD/YY) 6-9-25 **FINAL MICROCHIP SCAN PERFORMED BY (Initial):** [Redacted]

Returned to Owner	Adopted	Euthanized	Died in Custody	Transferred to Another Virginia Releasing Agency (name of agency)	Transferred to Out-of-State Releasing Agency (name of agency)	Other
		6-9-25				

Did you contact another shelter? **Why did they decline to accept?**