City of Danville
Animal Control Officer / Public Animal Shelter

ANIMAL CUSTODY RECORD

ANIMAL ID	40898	CUSTODY DATE MM/DD/YY	6-13-25	TIME	2:[illegible] AM (PM)

REASON FOR CUSTODY (mark appropriate box)

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

LOCATION WHERE CUSTODY WAS TAKEN: DAHS

OWNER'S NAME & ADDRESS (if known)

ADDITIONAL INFORMATION

[redacted]

ANIMAL DESCRIPTION

SPECIES	BREED	COLOR / MARKINGS	SEX: [x] Male [ ] Female Altered: Y (N) Unk
[x] Feline [ ] Canine [ ]	DSH	Gray Tabby	Approximate AGE: 2 [x] YR [ ] MO Approximate WEIGHT: 10 [x] 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)
no	no	no	no	Scan: 6-13-25 Scan 6-15-25 no

CUSTODY RECORD PREPARED BY

Signature: [redacted] **DATE:** (MM/DD/YY) 6-13-25

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 [illegible] procedures.

SIGNATURE: [redacted]

DISPOSITION OF ANIMAL Euth **HOLDING PERIOD EXPIRES ON (Date):** 6-20-25

DATE: (MM/DD/YY) 6-2025 **FINAL MICROCHIP SCAN PERFORMED BY (Initials):** [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
		6-2025				

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