City of Danville
Animal Control Officer / Public Animal Shelter

ANIMAL CUSTODY RECORD

ANIMAL ID	40933	CUSTODY DATE MM/DD/YY	6/10/25	TIME	10:00 AM / PM

REASON FOR CUSTODY (mark appropriate box)

☑ 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

[redacted]

OWNER'S NAME & ADDRESS (if known)

ADDITIONAL INFORMATION

TRAP

ANIMAL DESCRIPTION

SPECIES	BREED	COLOR / MARKINGS	SEX: ☑ Male ☐ Female Altered: Y (N) Unk
☑ Feline ☐ Canine ☐	DSH	blk/wht	Approximate AGE: 6wks ☐ YR ☐ MO
			Approximate WEIGHT: 2 ☑ LBS
			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: on 6/10 Scan NONE

CUSTODY RECORD PREPARED BY

Signature: [redacted] **DATE:** (MM/DD/YY) 6/10/25

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:

DISPOSITION OF ANIMAL [redacted] **HOLDING PERIOD EXPIRES ON (Date):** 6-25-25

DATE: (MM/DD/YY) 6.25.25 **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
				6.25.25		

Did you contact another shelter? NO **Why did they decline to accept?**