

**City of Danville**  
Animal Control Officer / Public Animal Shelter

**ANIMAL CUSTODY RECORD**

ANIMAL ID: 40945 CUSTODY DATE: 6-19-25 TIME: 1245  AM  PM

REASON FOR CUSTODY (mark appropriate box)

Stray / At Large  Owner Surrender  Seized  Bite Case Quarantine

Transfer from Another Releasing Agency  Virginia  Other:

Name:  Out-of-State

LOCATION WHERE CUSTODY WAS TAKEN: DAHS

OWNER'S NAME & ADDRESS (if known): Unknown

ADDITIONAL INFORMATION: city

**ANIMAL DESCRIPTION**

SPECIES:  Feline  Canine

BREED: DSH

COLOR / MARKINGS: Black

SEX:  Male  Female Altered:  Y  N  Unk

Approximate AGE: 2  YR  MO


Approximate WEIGHT: 6  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)          |
|--------------------------------|-------------------------------|-------------------|---------------------------------------|---|
| <u>None</u>                    | <u>None</u>                   | <u>None</u>       | <u>None</u>                           | Scan: <u>6-19-20</u><br>Scan: <u>6-20-25</u><br><u>none Det</u> |

**CUSTODY RECORD PREPARED BY**

Signature:  DATE: (MM/DD/YY) 6-19-25

**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** HOLDING PERIOD EXPIRES ON (Date): 6-26-25

DATE: (MM/DD/YY) 7-3-25 FINAL MICROCHIP SCAN PERFORMED BY (Initial): 

| 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 |
|-------------------|---------|------------|-----------------|---|---|-------|
|                   |         |            |                 | <u>Hornwood</u><br><u>Reels</u><br><u>7-3-25</u>                  | <del>Home</del>   |       |

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