

City of Danville
Animal Control Officer / Public Animal Shelter

ANIMAL CUSTODY RECORD

ANIMAL ID 40981 **CUSTODY DATE** MM/DD/YY 6/22/25 **TIME** 3:00 **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

DAYS

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

Titty Bitty
Female

ANIMAL DESCRIPTION

SPECIES	BREED	COLOR / MARKINGS	SEX: <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female Altered: Y <input checked="" type="radio"/> Unk <input type="radio"/>
<input checked="" type="checkbox"/> Feline <input type="checkbox"/> Canine <input type="checkbox"/>	DSTH	tabby grey/brown/ wht	Approximate AGE: 3/4 wks <input type="checkbox"/> YR <input type="checkbox"/> MO Approximate WEIGHT: 0.5 <input checked="" type="checkbox"/> 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: 6/22/25 Scan 6-28-25 none detected

CUSTODY RECORD PREPARED BY

Signature: DATE: (MMDDYY) 06/22/25

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 **HOLDING PERIOD EXPIRES ON (Date):** 6-28-25

DATE: (MMDDYY) 7-9-25 **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
				Home Ward 1 Rain 7-9-25		

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