

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

**ANIMAL CUSTODY RECORD**

**ANIMAL ID** 41031      **CUSTODY DATE** MM/DD/YY 6-28-25      **TIME** 1:45 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

D.A.H.S.

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

      mittens

**ANIMAL DESCRIPTION**


<b>SPECIES</b>	<b>BREED</b>	<b>COLOR / MARKINGS</b>	<b>SEX:</b> <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	<b>Altered:</b> Y N Unk
<input checked="" type="checkbox"/> Feline			<b>Approximate AGE:</b> 6	<input checked="" type="checkbox"/> YR <input type="checkbox"/> MO
<input type="checkbox"/> Canine			<b>Approximate WEIGHT:</b> 9	<input checked="" type="checkbox"/> LB
<input type="checkbox"/>			<b>OTHER:</b>	

DSIT      BIK white

**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: 6-28-25 Scan: 6-30-25 not detect

**CUSTODY RECORD PREPARED BY**

**Signature:**       **DATE:** (MM/DD/YY) 6-28-25

**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:** (MM/DD/YY) 7-25-25      **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
	7-25-25					

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