

City of Danville
Animal Control Officer / Public Animal Shelter

ANIMAL CUSTODY RECORD

ANIMAL ID 40890 **CUSTODY DATE** MM/DD/YY 6-12-25 **TIME** 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

DAHS

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

[Redacted Owner Information] Can't keep no longer
 Misty

ANIMAL DESCRIPTION

SPECIES	BREED	COLOR / MARKINGS	SEX: <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	Altered: Y N Unk
<input type="checkbox"/> Feline <input checked="" type="checkbox"/> Canine <input type="checkbox"/>	Chi	TAX	Approximate AGE: 3 <input checked="" type="checkbox"/> YR <input type="checkbox"/> MO	
			Approximate WEIGHT: 20# <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: 6-12-25 Scan 6-20-25 None-Det.

CUSTODY RECORD PREPARED BY

Signature: *[Redacted]* **DATE: (MM/DD/YY)** 6-12-25

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 *[Redacted]*

DISPOSITION OF ANIMAL **HOLDING PERIOD EXPIRES ON (Date):** 6-13-25

DATE: (MM/DD/YY) 6-24-25 **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
	6-24-25					

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