

City of Danville
Animal Control Officer / Public Animal Shelter

ANIMAL CUSTODY RECORD

ANIMAL ID 40891 **CUSTODY DATE** MM/DD/YY 6-12-25 **TIME** 3:45 **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

DAH5

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

[Redacted Owner Information] Bathroom issue

DUMBRE

ANIMAL DESCRIPTION

SPECIES	BREED	COLOR / MARKINGS	SEX: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female Altered: Y N Unk
<input type="checkbox"/> Feline <input checked="" type="checkbox"/> Canine <input type="checkbox"/>	Pit bull	BROWN	Approximate AGE: 5 yrs <input type="checkbox"/> YR <input type="checkbox"/> MO Approximate WEIGHT: 65 <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: 6-14-25

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) 6-18-25 **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
		6-18-25				

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