City of Danville
Animal Control Officer / Public Animal Shelter

ANIMAL CUSTODY RECORD

ANIMAL ID	40917	CUSTODY DATE MM/DD/YY	06·16·25	TIME	1:45 AM (PM)

REASON FOR CUSTODY (mark appropriate box)

☐ Stray / At Large ☒ Owner Surrender ☐ Seized ☐ Bite Case Quarantine

☐ Transfer from Another Releasing Agency ☒ Virginia ☐ Out-of-State

Name:

☐ Other:

LOCATION WHERE CUSTODY WAS TAKEN

DAHS

OWNER'S NAME & ADDRESS (if known)

[redacted]

ADDITIONAL INFORMATION

[redacted]

ANIMAL DESCRIPTION Cookie

SPECIES	BREED	COLOR / MARKINGS	SEX: ☐ Male ☒ Female Altered: Y (N) Unk
☐ Feline ☒ Canine ☐	Lab	Black white spot on chest	Approximate AGE: 4 ☒ YR ☐ MO
			Approximate WEIGHT: 60 ☒ 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: NONE detected 6-16-25 Scan 6-20-25

6-16-25

CUSTODY RECORD PREPARED BY

Signature: [redacted]

DATE: (MM/DD/YY) 06·16-25

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 Transfer **HOLDING PERIOD EXPIRES ON (Date):** 6·17·25

DATE: (MM/DD/YY) 7-11-25 **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
				Richmond 7·12·25 SPCA		

Did you contact another shelter? yes **Why did they decline to accept?** all closer shelters were full