

City of Danville  
Animal Control Officer / Public Animal Shelter

**ANIMAL CUSTODY RECORD**

ANIMAL ID

40939

CUSTODY DATE  
MM/DD/YY

6/18/25

TIME

4:45

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

[Redacted]

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

**ADDITIONAL INFORMATION**

[Redacted]

[Redacted]

**ANIMAL DESCRIPTION**

SPECIES

BREED

COLOR / MARKINGS

SEX:  Male  Female    Altered: Y  N  Unk

Feline  
 Canine

Pug Mix

brn/b.lk

Approximate AGE: 8 wks  YR  MO

Approximate WEIGHT: 3 lbs  5

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: 6-18-25  
Scan: NONE

**CUSTODY RECORD PREPARED BY**

Signature:

DATE: (MM/DD/YY)

6/18/25

**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):

DATE: (MM/DD/YY)

7-8-25

FINAL MICROCHIP SCAN PERFORMED BY (Initial):

7-8-25

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
	7-8-25					

Did you contact another shelter?

Why did they decline to accept?