Danville Police Department ___ Danville Animal Control ___ Danville Area Humane Society ___ Pittsylvania Animal Control ___ Public

TIME	2:50 AM/PM	CUSTODY DATE	5-3-25	I.D. Case/No.	40299

REASON FOR CUSTODY (mark appropriate box)						LOCATION WHERE CUSTODY WAS TAKEN
Stray	Owner Surrender	Seized	Bite Case	Transfer from other locality/facility	Other	
	X					DAHS

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

ANIMAL DESCRIPTION

SPECIES	BREED	COLOR/MARKINGS	SEX	APPROX. AGE	APPROX. WEIGHT	OTHER
Rodent	Rats	White	M	7 mths	3#	

ANIMAL IDENTIFICATION (complete all that apply, or indicate "none")

CITY/COUNTY LICENSE NUMBER	RABIES TAG NUMBER	TATTOO	COLLAR (Color, type, etc.)	OTHER IDENTIFICATION (specify)
none	none	none	none	none det. 5-3-25 5-7-25

CUSTODY RECORD PREPARED BY	DATE
SIGNATURE & TITLE [redacted]	5-3-25
DISPOSITION OF ANIMAL [redacted]	**DATE**

This form may be used by animal control officers, custodians of any pound or shelter, representatives of a humane society, or humane investigators to record and maintain the information required by the Code of Virginia. **This record shall be maintained for at least five years, and must be made available for public inspection upon request.** Information on this form is to be summarized and submitted annually to the State Veterinarian in the prescribed format. Questions regarding this form may be directed to the Office of the State Veterinarian, (804) 786-2483, P.O. Box 1163, Richmond, VA 23218.

Name [redacted] Date 5/3/25

Address [redacted] Telephone [redacted]

Characteristics: Good with children ✓ Lived Inside/Outside Housebroken ____

Disposition ____ Health ____ Gets along well with other pets ____

Did you contact another shelter about this animal? ____ Why did they decline to accept? ____

Has the animal bitten or scratched a person or animal within the past 10 days? ____

STATEMENTS OF SURRENDER

I do not own the above described animal and I relinquish custody to the Danville Area Humane Society.

Signature ____

Or

- I am the rightful owner of the above-described animal, and I surrender all property rights in such animal. No other person has a right of property in the animal. I acknowledge the animal may be immediately euthanized or disposed of in accordance with 3.2-6546, subsection D, subdivisions 1 through 5. When possible, the Danville Area Humane Society will keep owner-released animals for 24 hours before allowing them to be adopted. I acknowledge that may not be possible in all cases, and I also acknowledge that I will be required to follow the adoption policies and procedures if I decide I want the above-described animal back.

X Signature [redacted]