City of Danville
Animal Control Officer / Public Animal Shelter

ANIMAL CUSTODY RECORD

ANIMAL ID	CUSTODY DATE MM/DD/YY	TIME
41313	7-24-25	AM (circled) / PM

REASON FOR CUSTODY (mark appropriate box)

☒ Stray / At Large	☐ Owner Surrender	☐ Seized	☐ Bite Case Quarantine
☐ Transfer from Another Releasing Agency	☐ Virginia	☐ Other:	
Name:	☐ Out-of-State		

LOCATION WHERE CUSTODY WAS TAKEN

Dame St.

OWNER'S NAME & ADDRESS (if known)

ADDITIONAL INFORMATION

found under house

ANIMAL DESCRIPTION

SPECIES	BREED	COLOR / MARKINGS	SEX / Altered
☒ Feline ☐ Canine ☐	DSH	gry	SEX: ☐ Male ☒ Female Altered: Y N Unk Approximate AGE: 5wks ☐ YR ☐ MO Approximate WEIGHT: 2 ~~☒ 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: 7-24-25 Scan 7-30-25 None. Dot

CUSTODY RECORD PREPARED BY

Signature: [redacted]

DATE: (MM/DD/YY) 7-24-25

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): 7-31-25

DATE: (MM/DD/YY) 7-31-25 — **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
				Homeward Trails 7-31-25		

Did you contact another shelter?

Why did they decline to accept?