

City of Danville  
Animal Control Officer / Public Animal Shelter

**ANIMAL CUSTODY RECORD**

ANIMAL ID	41315	CUSTODY DATE MM/DD/YY	7-24-25	TIME	12	<del>AM</del> PM
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<b>REASON FOR CUSTODY (mark appropriate box)</b>				<b>LOCATION WHERE CUSTODY WAS TAKEN</b>	
<input checked="" type="checkbox"/> Stray / At Large	<input type="checkbox"/> Owner Surrender	<input type="checkbox"/> Seized	<input type="checkbox"/> Bite Case Quarantine	Dame St.	
<input type="checkbox"/> Transfer from Another Releasing Agency		<input type="checkbox"/> Virginia	<input type="checkbox"/> Other:		
Name:		<input type="checkbox"/> Out-of-State			

<b>OWNER'S NAME &amp; ADDRESS (if known)</b>	<b>ADDITIONAL INFORMATION</b>
	Found under house

<b>ANIMAL DESCRIPTION</b>			
SPECIES	BREED	COLOR / MARKINGS	SEX: <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female Altered: Y N Unk
<input checked="" type="checkbox"/> Feline	DSH	BLACK	Approximate AGE: 5wks <input type="checkbox"/> YR <input type="checkbox"/> MO
<input type="checkbox"/> Canine			Approximate WEIGHT: 2 <input checked="" type="checkbox"/> LB
<input type="checkbox"/>			OTHER:

<b>ANIMAL IDENTIFICATION (Check for all types on animal and complete all boxes. If not found, write NO)</b>				
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 Det

<b>CUSTODY RECORD PREPARED BY</b>		<b>DATE: (MM/DD/YY)</b>
		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:

<b>DISPOSITION OF ANIMAL</b>	<b>HOLDING PERIOD EXPIRES ON (Date):</b> 7-31-25
<b>DATE: (MM/DD/YY)</b> 7-31-25	<b>FINAL MICROCHIP SCAN PERFORMED BY (Initial):</b>

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
				Home ward Trails 7-31-25		

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