

City of Danville
Animal Control Officer / Public Animal Shelter

ANIMAL CUSTODY RECORD

ANIMAL ID	41114	CUSTODY DATE MM/DD/YY	7-3-25	TIME	AM PM
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REASON FOR CUSTODY (mark appropriate box)				LOCATION WHERE CUSTODY WAS TAKEN	
<input type="checkbox"/> Stray / At Large	<input checked="" type="checkbox"/> Owner Surrender	<input type="checkbox"/> Seized	<input type="checkbox"/> Bite Case Quarantine	DASH	
<input type="checkbox"/> Transfer from Another Releasing Agency		<input type="checkbox"/> Virginia	<input type="checkbox"/> Other:		
Name:		<input type="checkbox"/> Out-of-State			

OWNER'S NAME & ADDRESS (if known)	ADDITIONAL INFORMATION
[REDACTED]	Humming Bird <u>Housebroken</u> all shots -

ANIMAL DESCRIPTION					
SPECIES	BREED	COLOR / MARKINGS	SEX: <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	Altered: <input checked="" type="radio"/> N <input type="radio"/> Unk	
<input type="checkbox"/> Feline	pit	Brown/Black Brindle	Approximate AGE: 9 <input checked="" type="checkbox"/> YR <input type="checkbox"/> MO		
<input checked="" type="checkbox"/> Canine			Approximate WEIGHT: 40 <input checked="" type="checkbox"/> LB		
<input type="checkbox"/>			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: 7-3-25 7-5-25

CUSTODY RECORD PREPARED BY	
Signature: [REDACTED]	DATE: (MM/DD/YY) 7-3-25

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 HOLDING PERIOD EXPIRES ON (Date): 7-4-25

DATE: (MM/DD/YY) 7-7-25 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
				Caswell County Animal Protection Society		

Did you contact another shelter? *yes* Why did they decline to accept? [REDACTED]