

City of Danville
Animal Control Officer / Public Animal Shelter

ANIMAL CUSTODY RECORD

ANIMAL ID

41493

CUSTODY DATE
MM/DD/YY

8-8-25

TIME

11:30

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



OWNER'S NAME & ADDRESS (if known)

ADDITIONAL INFORMATION



ANIMAL DESCRIPTION

| SPECIES | BREED | COLOR / MARKINGS | SEX: <input checked="" type="checkbox"/> Male <input checked="" type="checkbox"/> Female | Altered: Y N Unk |
|---|-------|------------------|--|--|
| <input checked="" type="checkbox"/> Feline <input type="checkbox"/> Canine <input type="checkbox"/> | DSH | Gray | Approximate AGE: 2 | <input checked="" type="checkbox"/> YR <input type="checkbox"/> MO |
| | | | Approximate WEIGHT: 8 | <input type="checkbox"/> 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: 8-8-25 Scan 8-10-25 None |

CUSTODY RECORD PREPARED BY

Signature: DATE: (MM/DD/YY)

8-8-25

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 *Euth*

HOLDING PERIOD EXPIRES ON (Date): 8-16-25

DATE: (MM/DD/YY) 8-19-25

FINAL MICROCHIP SCAN PERFORMED BY (Initials)

| 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 |
|-------------------|---------|------------|-----------------|---|---|-------|
| | | 8-19-25 | | | | |

Did you contact another shelter?

Why did they decline to accept?