City of Danville
Animal Control Officer / Public Animal Shelter

ANIMAL CUSTODY RECORD

ANIMAL ID	41507	CUSTODY DATE MM/DD/YY	8-10-25	TIME	800 AM / PM

REASON FOR CUSTODY (mark appropriate box)

☑ Stray / At Large ☐ Owner Surrender ☐ Seized ☐ Bite Case Quarantine

☐ Transfer from Another Releasing Agency ☐ Virginia ☐ Out-of-State
Name:

☐ Other:

LOCATION WHERE CUSTODY WAS TAKEN

DAHS

OWNER'S NAME & ADDRESS (If known)

ADDITIONAL INFORMATION

ANIMAL DESCRIPTION

SPECIES	BREED	COLOR / MARKINGS	SEX / Altered
☑ Feline ☐ Canine ☐	DSH	BLK	SEX: ☐ Male ☑ Female Altered: Y (N) Unk
			Approximate AGE: 12 WKS ☐ YR ☐ MO
			Approximate WEIGHT: 2½ ☑ 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: 8-10-25 Scan 8.15.25 None

CUSTODY RECORD PREPARED BY

Signature: [redacted]

DATE: (MM/DD/YY) 8-10-25

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 Transfer HOLDING PERIOD EXPIRES ON (Date): 8.17.25

DATE: (MM/DD/YY) 8.19.25 **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 8.20.25		

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