


City of Danville
Animal Control Officer / Public Animal Shelter

ANIMAL CUSTODY RECORD

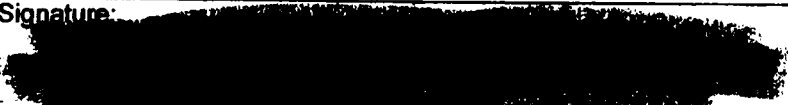
ANIMAL ID	41597	CUSTODY DATE MM/DD/YY	8/20/25	TIME	8:15	(AM) PM
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REASON FOR CUSTODY (mark appropriate box)				LOCATION WHERE CUSTODY WAS TAKEN		
<input checked="" type="checkbox"/> Stray / At Large	<input type="checkbox"/> Owner Surrender	<input type="checkbox"/> Seized	<input type="checkbox"/> Bite Case Quarantine	DAHS		
<input type="checkbox"/> Transfer from Another Releasing Agency		<input checked="" type="checkbox"/> Virginia	<input type="checkbox"/> Other:			
Name:		<input type="checkbox"/> Out-of-State				

OWNER'S NAME & ADDRESS (if known)	ADDITIONAL INFORMATION
	- found on their street - mama & 2 babies


ANIMAL DESCRIPTION					
SPECIES	BREED	COLOR / MARKINGS	SEX: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	Altered: Y N Unk	
<input checked="" type="checkbox"/> Feline	DSH	grey / brown / whit	Approximate AGE: 1 wk <input type="checkbox"/> YR <input type="checkbox"/> MO		
<input type="checkbox"/> Canine			Approximate WEIGHT: 0 <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: 8/20/25 Scan: 8:25:25 none detected

CUSTODY RECORD PREPARED BY	
Signature: 	DATE: (MM/DD/YY) 8/20/25

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 the adoption procedures.

SIGNATURE: 

DISPOSITION OF ANIMAL	Euth	HOLDING PERIOD EXPIRES ON (date):	8-27-25
DATE: (MM/DD/YY)	9-2-25	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
		9-2-25				

Did you contact another shelter?

Why did they decline to accept?