

City of Danville  
Animal Control Officer / Public Animal Shelter

ANIMAL CUSTODY RECORD

ANIMAL ID

41414

CUSTODY DATE  
MM/DD/YY

8/3/25

TIME

8:57

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 type="checkbox"/> Male <input checked="" type="checkbox"/> Female | Altered: Y N <input checked="" type="checkbox"/> Unk |
| <input type="checkbox"/> Feline<br><input checked="" type="checkbox"/> Canine<br><input type="checkbox"/> | heeler x | black w/ little white on feet | Approximate AGE: 3-4 YR <input type="checkbox"/> MO                           | Approximate WEIGHT: 30 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) |
| NON                            | NON                           | NON               | None                                  | Scan: NO 8/3/25<br>Scan 8525<br>none detected          |

CUSTODY RECORD PREPARED BY

Signature:

DATE: (MM/DD/YY)

8/3/25

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:

DISPOSITION OF ANIMAL: Euth HOLDING PERIOD EXPIRES ON (Date): 8-10-25

DATE: (MM/DD/YY) 8-13-25 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 |
|                   |         | 8-13-25    |                 |   |   |       |

Did you contact another shelter?

Why did they decline to accept?