

City of Danville
Animal Control Officer / Public Animal Shelter

ANIMAL CUSTODY RECORD

ANIMAL ID: 41440
CUSTODY DATE: 8/4/25
TIME: 2:00 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

OWNER'S NAME & ADDRESS (if known): _____
ADDITIONAL INFORMATION: _____

ANIMAL DESCRIPTION

SPECIES: Feline
BREED: Lab
COLOR / MARKINGS: blk
SEX: Male
Altered: N
Approximate AGE: 10 YR
Approximate WEIGHT: 40 LBS
OTHER: NONE

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	KONG HARNESS	Scan: 842 Scan: NONE Det

A CUSTODY RECORD PREPARED BY

Signature: _____ DATE: (MM/DD/YY) 8/4/25

OWNER STATEMENT

I am the rightful owner of this animal. I surrender all 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: ADOPTED HOLDING PERIOD EXPIRES ON (Date): 8-16-25

DATE: (MM/DD/YY) 8/5/25 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
8/5/25						

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