

City of Danville
Animal Control Officer / Public Animal Shelter

ANIMAL CUSTODY RECORD

ANIMAL ID

41491

CUSTODY DATE
MM/DD/YY

8/8/25

TIME

8:30

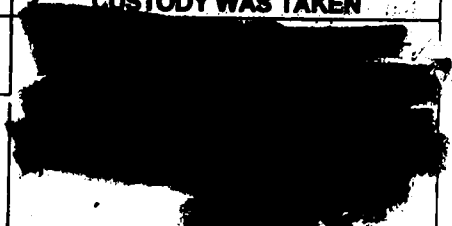
AM
PM

REASON FOR CUSTODY (mark appropriate box)

Stray / At Large Owner Surrender Seized Bite Case Quarantine

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

LOCATION WHERE CUSTODY WAS TAKEN



OWNER'S NAME & ADDRESS (if known)

ADDITIONAL INFORMATION



ANIMAL DESCRIPTION

SPECIES

BREED

COLOR / MARKINGS

SEX: Male Female Altered: Y N Unk

Feline
 Canine

Shepherd
Mix

brn

Approximate AGE: YR MO

Approximate WEIGHT: 35 LB S

OTHER: NONE DET

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

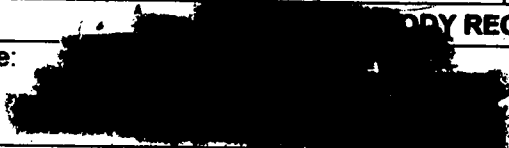
NONE

NONE

Scan: 4425
Scan: 4525
NONE
Det.

RECORD PREPARED BY

Signature:



DATE: (MM/DD/YY)

8/8/25

RIGHT OF 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 RTO

HOLDING PERIOD EXPIRES ON (Date): 8/15/25

DATE: (MM/DD/YY)

8/12/25

FINAL MICROCHIP SCAN PERFORMED BY (Initial):



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

8/12/25

Did you contact another shelter?

Why did they decline to accept?