

City of Danville
Animal Control Officer / Public Animal Shelter

ANIMAL CUSTODY RECORD

ANIMAL ID 41498 **CUSTODY DATE** 8-8-25 **TIME** 2:00 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

D A H S

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

 T4502

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 <input checked="" type="checkbox"/> Canine <input type="checkbox"/>	Rot	Blk / Brown	Approximate AGE: 10 <input type="checkbox"/> YR <input type="checkbox"/> MO
			Approximate WEIGHT: 125 <input checked="" type="checkbox"/> LB
			OTHER:

ANIMAL IDENTIFICATION (Check for all types on animal and complete all boxes. If not found, write NO)

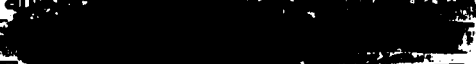
License Tag <small>(Number - Details)</small>	Rabies Tag <small>(Number - Details)</small>	Tattoo <small>(Describe)</small>	Collar <small>(Describe - Color, Type, etc.)</small>	Microchip or Other Identification <small>(Describe - Details)</small>
None	None	None	None	Scan: 8-8-25 Scan 82025 nmdc

CUSTODY RECORD PREPARED BY


Signature:  **DATE: (MM/DD/YY)** 8-8-25

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 held, I will follow adoption procedures.

SIGNATURE: 

DISPOSITION OF ANIMAL Euth **HOLDING PERIOD EXPIRES ON (Date):** 8-13-26

DATE: (MM/DD/YY) 8-13-25 **FINAL MICROCHIP SCAN PERFORMED BY (Initial):** 

Returned to Owner	Adopted	Euthanized	Died in Custody	Transferred to Another Virginia Releasing Agency <small>(name of agency)</small>	Transferred to Out-of-State Releasing Agency <small>(name of agency)</small>	Other
		8-13-25				

Did you contact another shelter? Yes **Why did they decline to accept?** P.C. they full