

City of Danville
Animal Control Officer / Public Animal Shelter

ANIMAL CUSTODY RECORD

ANIMAL ID 41571 **CUSTODY DATE** MM/DD/YY 08.17.25 **TIME** **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

DASH

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

[REDACTED] Roaming street and sleeping on random porches for the past couple of days.

ANIMAL DESCRIPTION

SPECIES	BREED	COLOR / MARKINGS	SEX: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female Altered: <input checked="" type="checkbox"/> N <input type="checkbox"/> Unk
<input type="checkbox"/> Feline	Great Dane	white w/brindle and black spots	Approximate AGE: 3.5 <input checked="" type="checkbox"/> YR <input type="checkbox"/> MO
<input checked="" type="checkbox"/> Canine			Approximate WEIGHT: 50 <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
None	None	None	green	[REDACTED] 8-20-25

CUSTODY RECORD PREPARED BY **DATE: (MM/DD/YY)**

[REDACTED] 08/17/25

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 **HOLDING PERIOD EXPIRES ON (Date):** 8-29-25

DATE: (MM/DD/YY) 8-15-25 **FINAL MICROCHIP SCAN PERFORMED BY (Initials)** [REDACTED]

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
				91575 K. Howard SPA		

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