

**City of Danville**  
**Animal Control Officer / Public Animal Shelter**

**ANIMAL CUSTODY RECORD**

**ANIMAL ID** 41610      **CUSTODY DATE** 8-22-25      **TIME** 9:15 <sup>AM</sup> <sub>PM</sub>

REASON FOR CUSTODY (mark appropriate box)				LOCATION WHERE CUSTODY WAS TAKEN
<input checked="" type="checkbox"/> Stray / At Large	<input type="checkbox"/> Owner Surrender	<input type="checkbox"/> Seized	<input type="checkbox"/> Bite Case Quarantine	
<input type="checkbox"/> Transfer from Another Releasing Agency Name: _____		<input type="checkbox"/> Virginia <input type="checkbox"/> Out-of-State	<input type="checkbox"/> Other: _____	

OWNER'S NAME & ADDRESS (if known)	ADDITIONAL INFORMATION
	Found Running in Street 

ANIMAL DESCRIPTION				
<b>SPECIES</b>	<b>BREED</b>	<b>COLOR / MARKINGS</b>	<b>SEX:</b> <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	<b>Altered:</b> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> Unk
<input type="checkbox"/> Feline <input checked="" type="checkbox"/> Canine <input type="checkbox"/>	Sheltzu X	Blac	Approximate AGE: 8 <sup>YR</sup> <input type="checkbox"/> MO	
			Approximate WEIGHT: 15 <input checked="" type="checkbox"/> LB	
OTHER: _____				

ANIMAL IDENTIFICATION (Check for all types on animal and complete all boxes. If not found, write NO)				
<b>License Tag</b> (Number - Details)	<b>Rabies Tag</b> (Number - Details)	<b>Tattoo</b> (Describe)	<b>Collar</b> (Describe - Color, Type, etc.)	<b>Microchip or Other Identification</b> (Describe - Details)
		None	flr Tag - green	Scan: 8-22-25 Scan: 8-23-25 None

**CUSTODY RECORD PREPARED BY**

Signature:      DATE: (MM/DD/YY) 8-22-25

**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** LTD      **HOLDING PERIOD EXPIRES ON (Date):** 9-3-25

**DATE: (MM/DD/YY)** 8-26-25      **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
8-26-25						

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