

City of Danville  
Animal Control Officer / Public Animal Shelter

# ANIMAL CUSTODY RECORD

ANIMAL ID

41665

CUSTODY DATE  
MM/DD/YY

8/26/25

TIME

1:00

AM

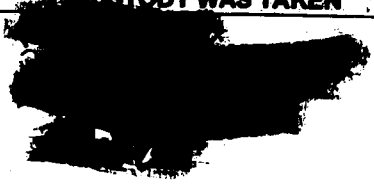
PM

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: Safe Keeping  
Name:     Out-of-State



OWNER'S NAME & ADDRESS (if known)

ADDITIONAL INFORMATION



in hospital

MAJOR

## ANIMAL DESCRIPTION

SPECIES

BREED

COLOR / MARKINGS

SEX:  Male  Female    Altered: Y  N  Unk

- Feline  
 Canine

german shepherd

tan/black

Approximate AGE: 3  YR  MO

Approximate WEIGHT: 75  LB  S

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  
(Describe - Details)

NONE

NONE

NONE

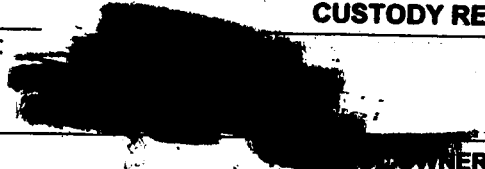
Pink  
Flea collar

Scan: 8-26-25  
Scan: NONE

## CUSTODY RECORD PREPARED BY

Signature:

DATE: (MMDDYY)



8/26/25

## 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 ADO

HOLDING PERIOD EXPIRES ON (Date):

DATE: (MMDDYY)

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?