

City of Danville  
Animal Control Officer / Public Animal Shelter

### ANIMAL CUSTODY RECORD

ANIMAL ID	41690	CUSTODY DATE MM/DD/YY	8-28-25	TIME	3:18	AM PM
-----------	-------	--------------------------	---------	------	------	----------

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

OWNER'S NAME & ADDRESS (if known)	ADDITIONAL INFORMATION
[REDACTED]	Mother 7 puppies Too many to keep Some are sickly

ANIMAL DESCRIPTION					
SPECIES	BREED	COLOR / MARKINGS	SEX: <input type="checkbox"/> Male <input type="checkbox"/> Female	Altered: Y N Unk	
<input type="checkbox"/> Feline <input checked="" type="checkbox"/> Canine <input type="checkbox"/>	Pit/Rott	Blk	Approximate AGE: 9 wks	<input type="checkbox"/> YR	<input type="checkbox"/> MO
			Approximate WEIGHT: 1	<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 (Number - Details)	Rabies Tag (Number - Details)	Tattoo (Describe)	Collar (Describe - Color, Type, etc.)	Microchip or Other Identification (Describe - Details)
None	None	None	None	Scan: 8-28-25 Scan: 8-29-25 None Det

CUSTODY RECORD PREPARED BY	
Signature: [REDACTED]	DATE: (MMDD/YY) 8-28-25

**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: [REDACTED]

DISPOSITION OF ANIMAL	Euth	HOLDING PERIOD EXPIRES ON (Date):	8-29-25
DATE: (MMDD/YY)	8-29-25	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
		8-29-25				

Did you contact another shelter? Yes Why did they decline to accept? SPCA - Full