City of Danville
Animal Control Officer / Public Animal Shelter

ANIMAL CUSTODY RECORD

ANIMAL ID	41703	CUSTODY DATE MM/DD/YY	8-29-25	TIME	5:15 AM (PM)

REASON FOR CUSTODY (mark appropriate box)

☐ Stray / At Large ☑ Owner Surrender ☐ Seized ☐ Bite Case Quarantine

☐ Transfer from Another Releasing Agency ☐ Virginia ☐ Other:
Name: ☐ Out-of-State

LOCATION WHERE CUSTODY WAS TAKEN: DAHS

OWNER'S NAME & ADDRESS (If known): [redacted]

ADDITIONAL INFORMATION:

ANIMAL DESCRIPTION

SPECIES	BREED	COLOR / MARKINGS	
☐ Feline ☑ Canine ☐	Lab / Shep	Blk / Wht	SEX: ☐ Male ☑ Female Altered: Y N Unk
			Approximate AGE: 3 ☐ YR ☑ MO
			Approximate WEIGHT: 15 ☐ 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: 8-29-25 Scan None

CUSTODY RECORD PREPARED BY

[redacted]

DATE: (MM/DD/YY) 8-29-25

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.

SIGNAT[redacted]

DISPOSITION OF ANIMAL Euth **HOLDING PERIOD EXPIRES ON (Date):** 8-30-25

DATE: (MM/DD/YY) 8-3-25 **FINAL MICROCHIP SCAN PERFORMED BY** [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
		8-3-25				

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