



# Owner Surrender Form



Thank you for visiting Dallas Animal Services. We want to do our best to help you and your pet. The City of Dallas Animal Services Department is an open admission municipal Shelter. By signing this form, you are releasing your animal to Dallas Animal Services. Please understand that:

1. You must be 18 yrs. old to surrender a pet.
2. You must be the sole owner of the pet.
3. Our staff can possibly provide resources to help you keep your pet.

Owner Name	Date of Birth	Valid DL/ID number	Phone Number	
Street Address	Apt #	City	State	Zip
E-mail Address			Secondary Phone	

## TELL US ABOUT YOUR ANIMAL(S) AND THE REASON FOR SURRENDERING

Animal Name:	<input type="checkbox"/> Male <input type="checkbox"/> Female	Age:
(Additional) Animal Name:	<input type="checkbox"/> Male <input type="checkbox"/> Female	Age:
(Additional) Animal Name:	<input type="checkbox"/> Male <input type="checkbox"/> Female	Age:
How long have you owned this animal?	<input type="checkbox"/> 0 – 1 Month <input type="checkbox"/> 2 – 4 Months <input type="checkbox"/> 4 – 6 Months <input type="checkbox"/> 6 Months – 1 Year <input type="checkbox"/> 1 – 3 Years <input type="checkbox"/> 3 – 5 Years <input type="checkbox"/> 5 – 7 Years <input type="checkbox"/> Over 7 Years	

### Medical Reason

- ☐ Medical needs of the animal
- ☐ Cost of medical needs for the animal
- ☐ Other medical reasons

### Behavior Reason

- ☐ Destructive tendencies - chews/claws furniture or going to the bathroom in places it shouldn't
- ☐ Aggression towards other animals
- ☐ Aggression towards humans they know
- ☐ Aggression towards unknown humans
- ☐ Separation Anxiety

### Personal Reason

- ☐ Didn't fit my lifestyle
- ☐ Moving
- ☐ Breed restrictions at place of residence
- ☐ Allergies to the animal
- ☐ Death of the owner or family member
- ☐ Behavior/temperament of resident pet in the home
- ☐ Cannot afford basic care (food, vaccines, etc.)
- ☐ Medical needs of owner or family member
- ☐ Other personal reason

Please explain in more detail below:

---



---

(MORE INFORMATION NEEDED ON BACK OF PAGE)

For Staff Use Only	DATE _____
Animal ID(s)# _____	Person ID# _____

<b>Has this animal bitten anyone in the last 10 days?</b>	<input type="checkbox"/> No, the animal has not bitten anyone in the last 10 days <input type="checkbox"/> Yes, the animal bit someone and the bite <u>did</u> break skin <input type="checkbox"/> Yes, the animal bit someone but the bite <u>did not</u> break skin If there was a bite incident in the last 10 days, what was the date?		
<b>Has this animal been to a veterinarian?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> I'm not sure	<b>Is this animal up to date on its shots/vaccinations?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> I'm not sure

## PET INFORMATION

Please **CIRCLE** what best describes your pet below. This can help us find better placement matches for your pet.

<b>Interactions with dogs?</b>	Playful   Aggressive   Tolerant   Fearful   Chases   Easygoing   Unknown If aggressive, please explain:									
<b>Interactions with cats?</b>	Playful   Aggressive   Tolerant   Fearful   Chases   Easygoing   Unknown If aggressive, please explain:									
<b>Interactions with young children?</b>	Playful   Aggressive   Tolerant   Fearful   Chases   Easygoing   Unknown If aggressive, please explain:									
<b>Please circle all that apply</b>	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;">House/ Litterbox Trained</div> <div style="width: 33%;">Independent</div> <div style="width: 33%;">Good with Strangers</div> <div style="width: 33%;">Lives Outdoors Only</div> <div style="width: 33%;">Leash Trained</div> <div style="width: 33%;">Escape "Artist"</div> <div style="width: 33%;">Destructive</div> <div style="width: 33%;">Social Butterfly</div> <div style="width: 33%;">Crate Trained</div> <div style="width: 33%;">Aggressive with Food/Toys</div> </div>									
<b>Are you aware of the following programs and services?</b>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border-bottom: 1px solid black;">Free and Low-Cost Vaccination Clinics</td> <td style="width: 10%; text-align: center;">Yes</td> <td style="width: 10%; text-align: center;">No</td> </tr> <tr> <td style="border-bottom: 1px solid black;">DPA! Positive Alternative to Shelter Surrender (PASS) Program</td> <td style="text-align: center;">Yes</td> <td style="text-align: center;">No</td> </tr> <tr> <td style="border-bottom: 1px solid black;">VCA Voucher for recent adoptions</td> <td style="text-align: center;">Yes</td> <td style="text-align: center;">No</td> </tr> </table>	Free and Low-Cost Vaccination Clinics	Yes	No	DPA! Positive Alternative to Shelter Surrender (PASS) Program	Yes	No	VCA Voucher for recent adoptions	Yes	No
Free and Low-Cost Vaccination Clinics	Yes	No								
DPA! Positive Alternative to Shelter Surrender (PASS) Program	Yes	No								
VCA Voucher for recent adoptions	Yes	No								

**Please explain in more detail below:**

---



---

Initials:

\_\_\_\_\_ I am the sole owner of the pet and have the authority to surrender the pet.

\_\_\_\_\_ I understand that it is the sole discretion of the Dallas Animal Services if said pet is adopted, transferred, or euthanized.

\_\_\_\_\_ I understand there is no waiting period or evaluation period for owner released pets prior to disposition.

\_\_\_\_\_ I understand that Animal Services is not required to advertise said animal for adoption nor place said animal up for adoption.

Owners Signature: \_\_\_\_\_

Date: \_\_\_\_\_