

SHEPPARTON ANIMAL SHELTER



ANIMAL SURRENDER FORM

Transfer of ownership to Greater Shepparton City Council

ANIMAL DETAILS

Type (Dog / Cat)	Breed (eg: Staffy)	Name	Age	Sex M/F	Desexed (Yes / No)	Microchip Number	Vaccinated (Yes / No)

DECLARATION OF OWNER OR AUTHORISED PERSON

I (full name)

Telephone:

of said address:

being a person over the age of 18, hereby declare that:

I am the owner of the animals described above and I am no longer willing or able to care for the above animals: or

The owner of the animals described above is:

of said address:

telephone no:

relationship to owner:

and I am authorised by the said owner to surrender the above animals as the owner is no longer willing or able to care for the above animals. I supply the following documentation as proof of authorisation by owner for agent to surrender animals on the owners behalf (eg: power of attorney, signed letter):

Reason for surrender of animals: I am unable or unwilling to care for the above animals because:

I hereby acknowledge that by Council taking possession of the animals, the ownership of the animals passes from the owner to the Council; and Council must deal with the animal in accordance with the State Legislation regulations and any relevant Code of Practice. I hereby agree to indemnify the Council from any loss or liability that may be incurred as a result of any inaccuracy, whether intended or otherwise, in this declaration.

Signed:

Date:

Witness Signature:

Name:

Please read the back of this form

Ownership Confirmed: Yes No Notes:

ANIMAL SURRENDER FORM



QUESTIONNAIRE

Please answer the following questions in relation to the animals surrendered. Please note that the questionnaire is not compulsory but will assist the Shepparton Animal Shelter in determining the best outcome for the animals.

Vet Clinic attended:

VETERINARY CARE

Vaccination: Yes No
Vaccination type: C3 C5 F3 F4 FIV Date:
Wormed: Yes No Date:
Flea Treatment: Yes No Date:
Heartworm treated: Yes No Date:
Ongoing veterinary conditions or medication?

HOME ENVIRONMENT / HISTORY

How long have you owned the animals?
Where did the animals live? Inside Outside Both Inside and Outside
What type of home? Older person Adults Older children Younger children
How much attention did the animals receive? Minimal Morning/night only All day/night
How many times were the dogs walked per week (on average)?
House trained? Yes No Details:
Litter trained? Yes No Details:
Formal training? Sit Stay Drop/down Come Details:
Are the animals friendly to? Children Dogs Cats Other animals Details:

What type of food do they prefer?
What type of toys do they play with?
How do you describe your animals behaviour?
How do you describe your animals temperament?
Any other comment or information that may be beneficial:

DOGS ONLY

What type of fencing did you have? 5-6ft 3ft Farm fences only Wood / colourbond
Wire/mesh Good condition Poor condition
Do the dogs have any of the following issues: Barking excessively Anxiety Escaping
(How many times? How does it get out? ie under/over/through/climbing provide detail)
Details:
Have the dogs ever:
Rushed aggressively at a person or animal: Yes No Details:
Attacked/bit a person: Yes No Details:
Attacked/bit an animal: Yes No Details:
Details: