

## DOG SURRENDER FORM

**PURPOSE OF FORM:** This form will be used to process the surrender of your dog.

I, \_\_\_\_\_  
(NAME)

of \_\_\_\_\_  
(FULL ADDRESS)

\_\_\_\_\_ (POSTCODE)

\_\_\_\_\_ (TELEPHONE)      \_\_\_\_\_ (MOBILE)      \_\_\_\_\_ (D.O.B)      \_\_\_\_\_ (IDENTIFICATION eg licence No)

Being the owner of,

DOG DETAILS			
Name _____	Breed _____		
Age _____	Colour _____		
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female	Desexed	<input type="checkbox"/> Yes <input type="checkbox"/> No
Microchip No. _____			

REASON FOR SURRENDER		
Has bitten or acted aggressively towards people or other animals	Yes	No
Is/has been the subject of a dangerous or nuisance dog order	Yes	No
Has an injury or disease	Yes	No
Other: <i>(Please specify)</i>		

IMPORTANT INFORMATION – PLEASE READ CAREFULLY	
And make the following declarations:	
<ol style="list-style-type: none"> <li>1. I am 18 years of age or over, and the legal owner of this animal.</li> <li>2. No other person has any proprietary interest in this animal, or if any other person has such an interest, they have authorised me to surrender the animal.</li> <li>3. I agree to indemnify the Fraser Coast Regional Council and keep the Fraser Coast Regional Council indemnified against all claims (if any), cost and expenses whatsoever arising out of any action by any person claiming interest in the animal.</li> <li>4. I understand that by completing and signing this form that I have surrendered the animal to Fraser Coast Regional Council and it no longer belongs to me.</li> <li>5. <b>I understand that not all animals are rehomed and that my pet may be euthanised on the same day.</b></li> </ol>	
Signature _____	Dated _____

Office Use Only			
CSO Initials:	Date:	CP#	

# DOG SURRENDER QUESTIONNAIRE

## WHERE DID YOU GET THIS DOG FROM?

- |   |   |
|---|---|
| <input type="checkbox"/> Pet Shop             | <input type="checkbox"/> Market                 |
| <input type="checkbox"/> Found Stray          | <input type="checkbox"/> Give Away              |
| <input type="checkbox"/> Friend/Relative/Gift | <input type="checkbox"/> Bred by Self           |
| <input type="checkbox"/> Rescue Organisation  | <input type="checkbox"/> Breeder                |
| <input type="checkbox"/> Other Shelter        | <input type="checkbox"/> Online – Specific Site |
| <input type="checkbox"/> Other _____          |   |

If given this animal, why was he/she give away to you?

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How old was the animal when you got him/her (if unknown, write unknown)? \_\_\_\_\_

How long have you had this animal? \_\_\_\_\_

Has this animal come from interstate?  Yes  No

Is the animal desexed?  Yes  No

What was the name of the vete/vet clinic where the animal was desexed?

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Is the animal microchipped?  Yes  No

Who is the contact person on the microchip form (to the best of your knowledge)?

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## EXPERIENCES & SOCIABILITY

How does your dog react with other dogs?

- |  |  |
|--|--|
| <input type="checkbox"/> Never had contact | <input type="checkbox"/> Friendly                    |
| <input type="checkbox"/> Wary              | <input type="checkbox"/> Aggressive (wouldn't trust) |

If answered *wary* or *aggressive*, please give more details \_\_\_\_\_

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Has the dog lived with another dog in the family home?  Yes  No

How does the dog react with cats and other animals?

- |  |  |
|--|--|
| <input type="checkbox"/> Never had contact | <input type="checkbox"/> Friendly                    |
| <input type="checkbox"/> Wary              | <input type="checkbox"/> Aggressive (wouldn't trust) |

If answered *wary* or *aggressive*, please give more details \_\_\_\_\_

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Has the dog ever had contact with children?  Yes  No

If yes, what age/s were the children? \_\_\_\_\_

How did the dog interact with the children?

- |   |  |
|---|--|
| <input type="checkbox"/> Plays in a friendly, gentle manner | <input type="checkbox"/> Is wary/scared of children    |
| <input type="checkbox"/> Gets very excitable and rough      | <input type="checkbox"/> Would not trust with children |

If give more details \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What is the dog like with strangers?

- |  |  |
|--|--|
| <input type="checkbox"/> Never had contact | <input type="checkbox"/> Friendly                    |
| <input type="checkbox"/> Wary              | <input type="checkbox"/> Aggressive (wouldn't trust) |

If answered *wary* or *aggressive*, please give more details \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Has the dog shown any aggression towards anyone or bitten anyone?

- |   |  |
|---|--|
| <input type="checkbox"/> Never shown aggression | <input type="checkbox"/> Lunged        |
| <input type="checkbox"/> Growled                | <input type="checkbox"/> Hard mouthing |
| <input type="checkbox"/> Nipped or snapped      | <input type="checkbox"/> Bitten        |

Please give more details \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Does the dog like toys?  Yes  No If yes, what type of toys? \_\_\_\_\_

Is the dog aggressive around toys?

- |   |  |
|---|--|
| <input type="checkbox"/> Never – toys can be taken away | <input type="checkbox"/> Yes – with all toys     |
| <input type="checkbox"/> Only with other dogs           | <input type="checkbox"/> Only with favourite toy |

Is the dog aggressive around food?

- |   |  |
|---|--|
| <input type="checkbox"/> Never – food can be taken away | <input type="checkbox"/> Yes – with all food                     |
| <input type="checkbox"/> Only with other dogs           | <input type="checkbox"/> Only with high value food such as bones |

Please give more details \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## TRAINING

Is the dog used to walking on a lead?  Yes  No

Has the dog ever attended formal training?  Yes  No

Has the dog attended Puppy Preschool?  Yes  No

### **DOG AT HOME**

Is the dog a constant barker?  Yes  No

If yes, how often, what time of the day, have there been complaints? \_\_\_\_\_

\_\_\_\_\_

Where does the dog spend most of its time? \_\_\_\_\_

\_\_\_\_\_

Has the dog ever escaped from your property?  Yes  No

If yes, how often does your dog escape? \_\_\_\_\_

How did the dog escape? \_\_\_\_\_

\_\_\_\_\_

What type of fencing is your dog escaping through? \_\_\_\_\_

### **HEALTH**

Has the dog ever had any medical or dietary issues? \_\_\_\_\_

\_\_\_\_\_

What is the name of the usual vet/vet clinic? \_\_\_\_\_

Has the dog been vaccinated?  Yes  No If yes, last vaccination? \_\_\_\_\_

Has the dog been flea/tick/worm treated?  Yes  No If yes, last treatment? \_\_\_\_\_

### **OTHER**

Is there anymore information about the dog that may be useful for us to know? \_\_\_\_\_

\_\_\_\_\_

### **DECLARATION AND SIGNATURE**

To the best of my knowledge, the above information is true and correct.

Signature of owner \_\_\_\_\_

Date \_\_\_\_\_