

Animal Transfer of Custody Form

Organization Information		
Organization Name Reptile Cove LLC	Phone Number 484-258-3860	Name of Employee Accepting Animal Jessica
What is the status of the animal <input type="checkbox"/> Relinquished by owner <input type="checkbox"/> Abandoned <input type="checkbox"/> Lost		

Animal Information (Complete all known information, if unknown leave field blank)		
Type of Animal (species)	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Unknown/Unsure	
Pet's name	Pet's Age	Pet's Food Preference (Frequency)
List the location from which you obtained the pet (Pet store, Person, Expo, ect.)		
List All Accessories Included With The Animal		
Veterinarian Name and Phone Number		Pet's Temperament
List any previous or current medical conditions		
Last time fed	Last shedding	Last clutch

Customer Information	
Customer Name	Customer Phone Number
Address (including street, city, state, & zip code)	
CUSTOMER ACKNOWLEDGEMENT OF TRANSFER OF CUSTODY Please read carefully: By signing below, I am voluntarily relinquishing my animal to Reptile Cove LLC and agree to immediately transfer all custody and ownership rights to Reptile Cove LLC. I understand that Reptile Cove LLC may attempt to adopt my pet into a new home, may relinquish my pet to another agency at their discretion, or may keep my pet for use in their educational programs. I understand that I will not be compensated for the animal or for any accessories left with the animal. I have, to the best of my knowledge, given accurate information regarding the health and temperament of my pet. I have read and understand the Animal Transfer of Custody and agree to all terms and conditions.	
_____	____/____/____
Customer Signature	Date