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**A Virginia Accredited Law Enforcement Agency**

Timbrook Public Safety Center  
231 East Piccadilly Street  
Winchester, VA 22601

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Website: [www.winchesterva.gov](http://www.winchesterva.gov)

TO: Virginia Department of Agriculture  
Ref: Animal Intake Policy 2023

The Winchester Police Department Animal Intake Policy is guided by the Code of Virginia Title 3.2 Agriculture Animal Care and Food; Chapter 65 Comprehensive Animal Care. Winchester Animal Control Officers are trained under code section 3.2-6556 requirements. Animal Control Officers recognize the need for possible intake dictated by Article 65 of the Code of Virginia regarding animal neglect, cruelty, abandonment, animal bite cases, animal seizures cases, and injury. In addition to Virginia Code, Winchester Police Department Animal Control Officers are guided by General Order 2-62; Animal Control.

ACO Supervisor Sgt. O'Connor S.C

A handwritten signature in blue ink, appearing to read "Sgt. O'Connor S.C", followed by a horizontal line.



AGENCY NAME: SPCA of Winchester, Frederick, and Clarke Counties 115 Featherbed Lane, Winchester VA 22601				<b>ANIMAL CONTROL CUSTODY RECORD</b> <i>This form includes all mandated information as required by §3.2-6557.B of the Code of Virginia.</i>		
<b>ANIMAL ID</b>		<b>CUSTODY DATE</b>	____ / ____ / 20____		<b>TIME</b>	AM / PM
<b>REASON FOR CUSTODY (mark appropriate box)</b>					<b>LOCATION WHERE CUSTODY WAS TAKEN</b>	
Stray/At Large (where animal was found)	Owner Surrender	Seized	Bite Case Quarantine	Other	SPCA Winchester, Frederick, & Clarke 115 Featherbed Lane Winchester, VA 22601	
<b>OWNER'S NAME, ADDRESS, &amp; PHONE NUMBER (if known)</b>			<b>ANIMAL CONDITION</b>		<b>ADDITIONAL INFORMATION</b>	
I hereby certify that I am the rightful owner of the above animal and surrender all property rights, ownership, and interests, if any, to the SPCA of Winchester, Frederick & Clarke Counties, and that no other person has a right of property in this animal. I understand that the animal may be immediately euthanized or disposed of by any method listed in Virginia Code Section 32-6546, D.1-5. I certify that to the best of my knowledge the animal has not bitten anyone in the last 10 days. I understand that I may not reclaim this animal and the final disposition will not be disclosed to me. The signer releases the SPCA, its agents and staff from all liability from the surrender of this animal.						
Custody Record Date: _____ Signed: _____						
<b>ANIMAL DESCRIPTION</b>						
Species	Breed	Color/markings	Sex	Approx. Age	Approx. Weight	Other
<b>ANIMAL IDENTIFICATION (check for all forms and complete all boxes. If not found, write NONE)</b>						
City/county License number	Rabies tag Number	Tattoo	Collar (color, type, etc.)		Other identification (microchip, ID tag, etc.)	
<b>CUSTODY RECORD PREPARED BY:</b>				<b>DATE:</b> ____ / ____ / 20____		
<b>DISPOSITION OF ANIMAL</b>				<b>DATE:</b> ____ / ____ / 20____		
Return 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