

ADMISSION, ASSESSMENT AND HISTORY RECORD



KENNEL No.				ADMISSION No. D 14748		
Stray	Surrender ☒	Abandoned	Returned	Impounded	Confiscated	Request for euthanasia
Date in	03/09/25		Time in	09:45		Date for release

IDENTIFICATION & LOST AND FOUND			Lost & Found checked	☒ Yes ☐ No	Lost & Found Date checked	03/09/25
Microchip / Collar or ID tag found	☒ Yes ☐ No	Date scanned or checked	03/09/25		Microchip or ID Tag number	

DESCRIPTION & HISTORY	Dog ☒	Cat	Other species (Specify)					
	Breed	Terrier A		Colour and Markings	Brown			
	Condition	Broken leg		Sex	M	Age	Adult	
	Temperament	Calm		Sterilisation details	Nil		Name	Lustag
	Coat	S	Tail	L	Teeth Condition		Ears	D
	Area found / collected from	Ongegend				Date	03/09/25	
	Reason for surrender	Broken leg						

ASSESSMENT			Surrendered by		☒ Name	Maxwell Pieterse	
GOOD WITH:			Found by				
Children	☒	No	Residential Address		31 Kopa Street, Ongegend		
Cats	☒		Postal Address		Mredenburg		
Other Dogs	☒		Tel (H)		Tel (W)		Cell
Livestock/other	☒		Email				
DO THEY:	Yes	No	Donation R		Cash	Card	EFT
Jump Fences	☒				(Receipt No.)		
Run Away	☒						
COMMENTS:							

PLEASE INSIST ON A RECEIPT

Confiscated: OB No: _____ Case No: _____ Inspector: _____

STATEMENT OF SURRENDER	
I do hereby certify that I <u>DO</u> / I <u>DO NOT</u> own the animal/s described above, that <u>IT IS</u> / <u>IT IS NOT</u> a stray and I <u>DO</u> / I <u>DO NOT</u> know where it comes from. I also freely surrender all interest, if any, therein to the SPCA, and I request that the animal be dealt with as deemed advisable in the discretion of the SPCA. It is expressly agreed that neither the SPCA nor its officers and employees will incur any obligation to me on account of such disposition of said animal/s. I confirm that I am over the age of eighteen (18) years of age. Also see 'Conditions' on reversed side.	Hiermee verklaar ek dat ek hierbo beskryf BESIT / NIE BESIT NIE, dat dit 'n RONDLOPER / NIE RONDLOPER NIE is, en dat ek WEET / NIE WEET waar dit vandaan kom nie. Ek doen ook vrywillig afstand van alle belange daarin, indien enige, ten gunste van die DBV en ek versoek dat die hier hanteer word soos wat die DBV goed ag. Daar word uitdruklik ooreengekom dat nóg die DBV nóg sy amptenare, en werknemers enige verpligtinge het, teenoor my ten opsigte van die hantering van die hier/nie. Ek bevestig dat ek bo die ouderdom van agtien (18) jaar is. Sien ook die 'Voorwaardes' op die agterblad.
Signature	Witness for Society
<i>C. Wolff</i>	<i>JP</i>

FOR OFFICE USE: PENDING ADOPTION	Details of second Applicant
Details of first Applicant	Details of third Applicant

Claimed ☐ Adopted ☐ Euthanased ☒ Died ☐ Other ☐ On Date: 03/09/25