

TEST AND DEMO SPCA

ADMISSION, ASSESSMENT AND HISTORY RECORD



KENNEL No:		DK20		ADMISSION NO:		ADM000031	
Stray	Surrender X	Abandoned	Returned	Impounded	Confiscated/ Sized	Request for euthanasia	
Date:	2026-06-02		Date for release:		Time in:	09:03	

IDENTIFICATION & LOST AND FOUND		Lost & Found checked		☐	Yes	Lost & Found	
				☐	No	Date checked	
Microchip/Collar or ID tag found	Yes	No	Date scanned or checked	2026-06-02		Microchip or ID Tag Nr	

DESCRIPTION & HISTORY	Dog X		Cat		Other species (Specify)		
	Breed		BICHON FRISE			Colour	
	Condition					Sex	Male
	Temperament					Sterilisation details	Unspecified
	Coat		Tail		Teeth Condition	Ears	Size
	Area found/collected from		KLOOF			Date	2026-06-02
	Reason for surrender		Unwanted animal				

Collected by: STACEY FAYERS

ASSESSMENT			Surrendered by		X	Name	JACK
GOOD WITH:	Yes	No	Found				
Children			Residential Address		21A VILLAGE ROAD, KLOOF		
Cats			Postal Address		21A VILLAGE ROAD, KLOOF		
Other Dogs			Tel (H)		Tel (W)		0812222222
Livestock/other			Email:				
DO THEY:	Yes	No	DONATION:		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 DO/I DO NOT own the animal/s described above, that IT IS/IT IS NOT a stray and I DO/I DO NOT 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	Hiermee verklaar ek dat ek dier/e hierbo beskryf BESIT/NIE BESIT NIE, dat dit 'n RONDLOPER/NIE RONDLOPER NIE is, en dat ek WEET/NIE WEET waar dit verdaan kom nie. Ek doen ook vrywillig afstand van alle belange daarin, indien enige, ten gunste van die DBV en ek versoek dat die dier hanteer word soos wat die DBV goed ag. Daar word uitdruklik ooreengekom dat nog die DBV nog sy amptenare, en werknemers enige verpligtinge het, teenoor my ten opsigte van die hantering van die dier/e nie. Ek bevestig dat ek bo die ouderdom van agtien (18) jaar is. Sien ook die 'Voorwaardes' op die

Signature		Witness for Society	
-----------	--	---------------------	--

I confirm that I have given TEST AND DEMO SPCA permission to process my personal information for the purpose of this document, I understand that I have the right to request that it be edited or deleted.

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

Claimed Adopted Euthanised Died Other On Date: _____

CONDITIONS / VOORWAARDES

3. Enige koste hierop onderskryf is verskuldig en betaalbaar op aanvraag.

REQUEST FOR EUTHANASIA

CLAIMANT

MEDICAL RECORD	
----------------	--

Date	Treatment	Cost	Signature	Name
Date	Name	Tel. No.	Comments	

