



CRUELTY COMPLAINT FORM AND INSPECTOR'S REPORT

11021/12/22
Complaint No.

DATE OF COMPLAINT: 02 December 2022 TIME: 12H10

COMPLAINANT DETAILS:

NAME & SURNAME: Gerda Booysens Oordhuizen (Agent)

ADDRESS:

E-MAIL: TEL: CELL: 082 309 6249

ADDRESS OF PREMISES / PERSON TO BE INVESTIGATED:

NAME & SURNAME:

ADDRESS: 817 Welchagen Street
Despoort

E-MAIL: TEL: CELL:

NATURE OF COMPLAINT:

Abandoned dogs in the property.

Complainant notified:	Date: 02/12/2022	Time:
Telephonically	E-mail	In person

INVESTIGATION REPORT

DATE: 02/12/2022 TIME: 12H35 WARNING No

Access granted by: Sydney

List animals seen:

Apikanis
Apikanis
Apikanis
Apikanis

Concerns	Yes	No
Water available	✓	
Adequate shelter available	✓	
Adequate space available	✓	
Clean living environment	✓	
Animal/s chained / tethered / caged		✓
Animal/s in good condition	✓	✓
Veterinary problems / health concerns		✓

Note: Any concerns noted in this table must be explained in detail in the Inspector's report.

Report/Findings:

The complaint was investigated whereby the dogs were found roaming freely in the property. They appeared to be in acceptable condition as per visual assessment. They had provision of food and water including adequate shelter to escape the elements. Two of which were captured and taken to Tshwane SPCA for better consideration. The remaining two could not be loaded and the driver was later dispatched to collect them.

Action taken: (i.e. warning, education, seize, etc)

INSPECTOR: Mpho Legane

SIGNATURE:

FOLLOW-UP INSPECTION

DATE: _____

TIME: _____

WARNING No _____

Access granted by: _____***List animals seen:*** _____

Concerns	Yes	No
Water available		
Adequate shelter available		
Adequate space available		
Clean living environment		
Animal/s chained / tethered / caged		
Animal/s in good condition		
Veterinary problems / health concerns		
Note: Any concerns noted in this table must be explained in detail in the Inspector's report.		

Report/Findings: _____

_____***Action taken:*** (i.e. warning, education, seize, etc) _____

INSPECTOR: _____

SIGNATURE: _____

FOLLOW-UP INSPECTION

DATE: _____

TIME: _____

WARNING No _____

Access granted by: _____***List animals seen:*** _____

Concerns	Yes	No
Water available		
Adequate shelter available		
Adequate space available		
Clean living environment		
Animal/s chained / tethered / caged		
Animal/s in good condition		
Veterinary problems / health concerns		
Note: Any concerns noted in this table must be explained in detail in the Inspector's report.		

Report/Findings: _____

_____***Action taken:*** (i.e. warning, education, seize, etc) _____

INSPECTOR: _____

SIGNATURE: _____

Outcome of case:			
No welfare concerns - NFA	Owner complied - NFA	Animal/s confiscated	
Animal/s signed over	Animal/s given away	Owner moved	
Charges laid	SAPS CAS No.	OB No.	
If referred, to who?		Date & time:	

ADMISSION, ASSESSMENT AND HISTORY RECORD



KENNEL No.				ADMISSION No.		
Stray	<u>Surrender</u>	Abandoned	Returned	Impounded	Confiscated	Request for euthanasia
Date in	<u>02/12/2022</u>		Time in		Date for release	

IDENTIFICATION & LOST AND FOUND			Lost & Found checked	Yes No	Lost & Found Date checked
Microchip / Collar or ID tag found	Yes No	Date scanned or checked	<u>02/12/2022</u>	Microchip or ID Tag number	<u>None</u>

DESCRIPTION & HISTORY	<u>Dog</u>	Cat	Other species (Specify)			
	Breed	<u>American</u>		Colour and Markings	<u>Black & Tan</u>	
	Condition	<u>Acceptable</u>		Sex	<u>Female</u>	
	Temperament	<u>Scared, Aggro</u>		Sterilisation details	<u>NO</u>	
	Coat	<u>Short</u>	Tail	<u>Long</u>	Teeth Condition	<u>Good</u>
	Area found / collected from	<u>Droopend</u>			Date	<u>02/12/2022</u>
	Reason for surrender	<u>Male Abandoned</u>				

ASSESSMENT		Surrendered by ☒ Name <u>Sydney Moyo</u>	
GOOD WITH:	Yes No	Found by	
Children		Residential Address	
Cats			
Other Dogs			
Livestock/other		Postal Address	<u>817 Weltharpen Street droopend</u>
DO THEY:	Yes No	Tel (H)	Tel (W)
Jump Fences			Cell <u>0846522344</u>
Run Away		Email	
COMMENTS:		Donation R	Cash Card EFT (Receipt No.)
		PLEASE INSIST ON A RECEIPT	

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

STATEMENT OF SURRENDER	
I do hereby certify that <u>I DO</u> / I DO NOT own the animal/s described above, that IT IS / IS NOT a stray and <u>DO</u> / 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 side.	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 vandaan 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 nóg die DBV nóg 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 agterblad.
Signature <u>[Signature]</u>	Witness for Society <u>[Signature]</u>

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

Claimed ☐ Adopted ☐ Euthanased ☐ Died ☐ Other ☐ On Date: _____

CONDITIONS / VOORWAARDES	
---------------------------------	--

1. Die **Eienaar / Vinder** doen hiermee afstand van alle eiendomsreg in die **dier/e**, beskryf **op die keersy**, ten gunste van die DBV om mee te beskik volgens hul **uitsluitlike diskresie** met dien verstande dat die Vereniging sal poog om dit in 'n **nuwe huis te plaas of**, indien hul nie in staat is om dit te doen nie, om sy pynlose vernietiging te bewerkstellig.
2. Indien, volgens mening van 'n veearts of 'n gekwalifiseerde inspekteur in terme van Artikel 5 van Wet 71 van 1962 (Dierebeskermingswet) 'n **dier** aangebied word vir toelating **wat so siek, ernstig beseer of in sodanige fisiese toestand is** dat dit vir **menslikheidsredes vernietig behoort te word**, die Vereniging die reg sal hê om 'n **vernietiging** te bewerkstellig deur goedgekeurde menswaardige metodes.
3. E'nige koste hierop onderskryf is verskuldig en betaalbaar op aanvraag.
4. Die Vereniging sal geen **dier** plaas wat ongesteryliseer is nie.

REQUEST FOR EUTHANASIA			
Owners authorising signature		Witness for Society signature	
Reason for Euthanasia <i>Very scared - Aggressive</i>			

Euthanase Bottle No: _____ Quantity used: _____ AWA: MPHO

CLAIMANT	
-----------------	--

Name: Prof/Dr/Mr/Mrs/Ms (including initials)_____

Residential Address: _____

Tel No (h): _____ Tel No (w): _____ Cell No: _____

Postal Address: _____

E-mail Address: _____

Reclaim Charge: _____ Added Donation: _____ Cash//EFT/Card (Receipt No.) _____

ID/Passport No: _____ Copy Attached: Yes ☐ No ☐

Vehicle Model _____ Colour _____ Reg. No: _____

Signature: _____ Witness for Society: _____

Microchip / Collar and ID tag given	Yes	Microchip/ ID Tag details	Date: _____
	No		

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

[illegible]

ADMISSION, ASSESSMENT AND HISTORY RECORD



KENNEL No.				ADMISSION No.		
Stray	<u>Surrender</u>	Abandoned	Returned	Impounded	Confiscated	Request for euthanasia
Date in	<u>02/12/2022</u>		Time in		Date for release	

IDENTIFICATION & LOST AND FOUND			Lost & Found checked	Yes No	Lost & Found Date checked
Microchip / Collar or ID tag found	Yes No	Date scanned or checked	<u>02/12/2022</u>		Microchip or ID Tag number <u>None</u>

DESCRIPTION & HISTORY	<u>Dog</u>	Cat	Other species (Specify)		
	Breed	<u>Africanis</u>		Colour and Markings	<u>Tan & Black</u>
	Condition	<u>Acceptable</u>		Sex	<u>Male</u>
	Temperament	<u>Scared</u>		Sterilisation details	<u>NO</u>
	Coat <u>Short</u>	Tail <u>Long</u>	Teeth Condition <u>Acceptable</u>	Ears <u>Floppy</u>	Size <u>M</u>
	Area found / collected from	<u>Dorpood</u>			Date <u>02/12/2022</u>
	Reason for surrender <u>Male Abandoned</u>				

ASSESSMENT		Surrendered by		Name
GOOD WITH:	Yes No	Found by		<u>Sydney Noye</u>
Children		Residential Address		
Cats				
Other Dogs				
Livestock/other		Postal Address	<u>817 Weltharzen Street dorpoort</u>	
DO THEY:	Yes No	Tel (H)	Tel (W)	Cell <u>0846522344</u>
Jump Fences		Email		
Run Away		Donation R	Cash	Card
COMMENTS:			EFT	(Receipt No.)

PLEASE INSIST ON A RECEIPT

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

STATEMENT OF SURRENDER	
I do hereby certify that <u>DO</u> / <u>DO NOT</u> own the animal/s described above, that it <u>IS</u> / <u>IS NOT</u> a stray and <u>DO</u> / <u>DO NOT</u> know where it comes from. I also <u>freely</u> 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 dier/e 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 dier hanteer word soos wat die DBV goed ag. Daar word uitdruklik ooreengekom dat nog die DBV nóg 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 agterblad.
Signature <u>[Signature]</u>	Witness for Society <u>[Signature]</u>

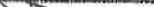
FOR OFFICE USE: PENDING ADOPTION	
Details of first Applicant	Details of second Applicant
	Details of third Applicant

Claimed ☐ Adopted ☐ Euthanased ☐ Died ☐ Other ☐ On Date: _____

CONDITIONS / VOORWAARDES

1. The Owner / Finder hereby relinquishes all ownership rights to the animal/s described on the reverse to the SPCA for disposal at its sole discretion on the understanding that the Society shall endeavour to place it in a new home or, if unable to do so, effect its painless destruction.
2. If, in the opinion of a veterinarian or a qualified inspector in terms of Section 5 of Act 71 of 1962 (Animals Protection Act) an animal presented for admission is so diseased, severely injured or in such physical condition that it should be destroyed for humanitarian reasons, the Society shall have the right to effect such destruction by approved humane methods.
3. Any charges endorsed hereon are due and payable on request.
4. The Society will not home any animal unsterilised.
1. Die Eienaar / Vinder doen hiermee afstand van alle eiendomsreg in die dier/e, beskryf op die keersy, ten gunste van die DBV om mee te beskik volgens hul uitsluitlike diskresie met dien verstande dat die Vereniging sal poog om dit in 'n nuwe huis te plaas of, indien hul nie in staat is om dit te doen nie, om sy pynlose vernietiging te bewerkstellig.
2. Indien, volgens mening van 'n veearts of 'n gekwalifiseerde inspekteur in terme van Artikel 5 van Wet 71 van 1962 (Dierebeskermingswet) 'n dier aangebied word vir toelating wat so siek, ernstig beseer of in sodanige fisiese toestand is dat dit vir menslikheidsredes vernietig behoort te word, die Vereniging die reg sal hê om so 'n vernietiging te bewerkstellig deur goedgekeurde menswaardige metodes.
3. Enige koste hierop onderskryf is verskuldig en betaalbaar op aanvraag.
4. Die Vereniging sal geen dier plaas wat ongesterriliseer is nie.

REQUEST FOR EUTHANASIA

Owners authorising signature		Witness for Society signature	
Reason for Euthanasia	Very scared Aggressive		

Euthanasia Bottle No: _____ Quantity used: _____ AWA: MP40

CLAIMANT

Name: Prof/Dr/Mr/Mrs/Ms (including initials) _____

Residential Address: _____

Tel No (h): _____ Tel No (w): _____ Cell No: _____

Postal Address: _____

E-mail Address:

Reclaim Charge: _____ Added Donation: _____ Cash//EFT/Card (Receipt No.) _____

ID/Passport No: _____ Copy Attached: Yes ☐ No ☐

Vehicle Model _____ Colour _____ Reg. No. _____

Signature: _____ Witness for Society: _____

Microchip / Collar and ID tag given	Yes	Microchip/ ID Tag details	Date: _____
	No		

MEDICAL RECORD

[illegible]