



ADMISSION NO

NO 591/1296

PRE AND POST HOME INSPECTION FORM DOMESTIC ANIMALS

PASSED: YES / NO

DATE UNDERTAKEN: 03/08/2021

TIME: 14:30 / 15:00

NAME OF APPLICANT: Johan Olivier

ADDRESS: 17 Vaal Drive, Petersfield Ext, Springs

HOME TEL NO: 082 887 1740

CELL NO: 083 445 1153

ANIMAL(S) ADOPTING: Rottweilers x2

SEX: Male and Female

AGE: Young Adults

PRE- HOME INSPECTION:

PROPERTY DESCRIPTION			
Type and height of fence: FACE BRICK WALL WITH ELECTRIC WIRE, 1.8 m	Suitability of fence (i.e. small pets can't escape):		
Suitable shelter? (i.e. Kennel in protected area)	YES ☒ / NO ☐	Any sign of Chain/Runner?	YES ☐ / NO ☐
Is the front yard separated from the back?	YES ☒ / NO ☐	If yes, what partitioning?	DOUBLE GARAGE STEEL GATE
Any hazards? (pool, rubble, razor wire, etc)	YES ☐ / NO ☐	Specify:	
Does applicant live at the address?	YES ☐ / NO ☐	How many animals are on the property?	

DESCRIPTION OF ANIMALS ON PROPERTY

	1	2	3	4	5
BREED	JP	MIN PIXY			
CONDITION	SATISFACTORY	SATISFACTORY			
WELFARE (good?)	GOOD	GOOD			
SEX & AGE	FEMALE / 15 YRS	MALE / 16 YRS	/	/	/
STERILISED	YES ☒ / NO ☐	YES ☒ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐

OTHER INFORMATION / COMMENTS

PROPERTY APPROVED FOR THE FOLLOWING ANIMALS:



CATS



SMALL DOGS



MEDIUM DOGS



LARGE DOGS

INSPECTED BY: HENDRIK DUISHEP

SPCA: SPRINGS

SIGNATURE:

POST HOME INSPECTIONS

DATE	RESULT	REMARK	BY WHOM
03 June 2022	No welfare concerns	Animals in good condition	Charne J Handl.

DIAGRAM OF PROPERTY ON REVERSE OF THIS PAGE



ON, ASSESSMENT AND HISTORY RECORD

KENNEL No. 4 AD34				ADMISSION No. DO 597		
Stray	<u>Surrender</u>	Abandoned	Returned	Impounded	Confiscated	Request for euthanasia
Date in	08/06/21		Time in	12:00	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		Microchip or ID Tag number	

DESCRIPTION & HISTORY	☒ Dog	Cat	Other species (Specify)		
	Breed	ROTTWEILER		Colour and Markings	BLACK & BROWN
	Condition	SATISFACTORY		Sex	FEMALE
	Temperament	FRIENDLY		Age	± 3 YEARS
	Coat	Tail	Teeth	Sterilisation details	Name
	SHORT	LONG	GOOD	YES	NUFF
	Area found / collected from	PETERSFIELD EXT			Date
	08/06/21				
Reason for surrender RELOCATED. SPACE TOO SMALL					

ASSESSMENT		Surrendered by		Name	
Found by				ANDRE VAN ZYL	
Residential Address		12 VET STE, PETERSFIELD EXT			
Postal Address		SPRINGS			
Tel (H)		Tel (W)		Cell	
				0829417145	
Email					
Donation R		Cash	Card	EFT	(Receipt No.)
PLEASE INSIST ON A RECEIPT					

GOOD WITH:

Yes

No

Children

☒

☐

Cats

☐

☐

Other Dogs

☐

☐

Livestock/other

☐

☐

DO THEY:

Yes

No

Jump Fences

☐

☒

Run Away

☒

☐

COMMENTS:

NOT GOOD WITH OTHER DOGS

BROTHER & BISTER

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

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

Jack & Nula



APPLICATION TO ADOPT AN ANIMAL

PLEASE NOTE: We retain the right to decline this application

NAME - Prof/Dr/Mr/Mrs/Ms (including initials): JOHAN H. OLIVIER

HOME ADDRESS: 17 VALLE DRIVE, PETERSFELD EXT, SPRINGS, 1559

ID NO.: 521119502808T

POSTAL ADDRESS: P.O. Box 1870, SPRINGS, 1560

TEL NO (H): — (B): —

CELL NO: 0834451153 FAX NO: —

E-MAIL: johanholivier@gmail.com

Address where animal will be kept: 17 VALLE DRIVE, PETERSFELD EXT, SPRINGS

Reason for wanting an animal: AS A PET TO BE SPOILED

Occupation: PENSIONER

Do you own or rent your property: OWN Do you have consent from owner / Body Corporate? N/A

Are you a student with consent to keep pets? YES/NO

Reason for wanting an animal: SAME AS ABOVE

Is the animal for yourself? YES/NO

Is the animal a replacement for a pet which has died from: Distemper/Parvovirus/Snuffles/Cat Flu/Biliary YES/NO

What breed of dog or cat are you interested in? ROTTWEILER

Can you afford private veterinary fees? YES Who is your vet? SELPAK VET.

How many animals live on your property DOGS 2 (small) CATS — OTHER PITTIE (AFRICAN GREY)

What are the sexes of your animals? DOGS: Male ✓ Female ✓ CATS: Male — Female —

Are all your animals sterilised? Give details YES

How many dogs and cats have you owned over the past 3 years? DOGS 5 CATS — OTHER AFRICAN GREY

Which animals do you still have, and what happened to the others? TWO DOGS - THEY DIED OF OLD AGE.

Is your property fenced and has a proper gate? YES Will you chain/cage an animal? NO

Full description of the fencing and gate: PRE-CAST WALL Height: 1,6 METERS

What shelter is provided: OUTDOORS ✓ KENNEL ✓ OTHER —

Have you previously had pets from an SPCA? NO Are there children under the 10 years in your household? NO

Pre Home Inspection Fee: — Receipt No.: —

Declaration: The above information is true and correct

I confirm that I have never been convicted nor charged with cruelty or neglect of any animal.

SIGNATURE OF APPLICANT

Date of application 30 June 2021

The following documents to be attached: - ID, proof of residence, proof that pets are allowed.
Please email completed form and supporting documents to: adoptions@spcasprings.co.za



ADOPTION CONTRACT

DOG/CAT	Breed <u>ROTTWEILER</u>	Male/Female <u>Male</u>	ADMISSION NO: <u>44 597/1296</u>
Microchip and or ID Tag Number:-			

This animal has been given to you in the firm and confident belief that it will receive a good home with responsible and loving care. Ownership of an animal yields much pleasure and satisfaction. It also has its obligations and responsibilities. The fact that the animal has been in our care usually indicates that someone has, in the past, failed to recognise these responsibilities.

1. I do hereby confirm and undertake that:
 2. I am over eighteen (18) years of age.
 3. All family members agree to the adoption and will abide by the conditions in the contract.
 4. I will not part with possession of the animal except to **return** it to the SPCA if for any reason I am unable to keep it. In the event that I fail to do so, I agree that I will be liable to pay to the SPCA all costs which they may incur in obtaining confirmation that the animal has been homed to a suitable person, with suitable premises. In the event that this is not the case, I also agree that I will be liable for all costs which the SPCA may incur, including all legal costs on an attorney and client scale, in recovering possession of the animal.
 5. I will give the animal a fair chance to adjust to its new home.
 6. I understand that donations are not refundable or transferable.
 7. I will feed and house the animal to the Society's satisfaction.
 8. I will **not chain or cage** the animal, and understand that if it is found chained or caged, it will be removed from my care immediately.
 9. I can afford the services of a private veterinary practitioner.
 10. I will ensure that vaccinations are kept up to date and in the case of injury or illness professional veterinary treatment will be provided.
 11. I understand that in the case of illness (not injury) occurring within the first seven (7) days of adoption, I may bring the animal to the Society to be attended to by its veterinarian (at the discretion of the Society) at no charge to myself.
 12. I will ensure that the animal is sterilised as stipulated by the Society.
 13. I undertake to ensure that the animal has identification at all times, either in the form of a microchip or a collar and tag – only **elasticised or quick release collars** may be used for cats.
 14. My property is adequately enclosed and at no time shall I knowingly allow my dog to roam the streets.
 15. I will notify the Society within forty-eight (48) hours should the animal die or go missing.
 16. I know and understand the "By-Laws pertaining to animals" of the Municipality in which I reside.
 17. I will permit an authorised officer of the Society to visit my premises from time to time, to be assured that the animal is being treated in accordance with this Policy, and I will allow the Society to repossess the animal, if in the Society's opinion, the terms of this policy are not being reasonably adhered to.
 18. I will not use or allow the animal to be used as a watchdog on any industrial or commercial premises.
 19. I will notify the Society of any change of address in writing by registered post within seven (7) days.
- * I agree to never harm, neglect, abuse or abandon the animal that I adopt.*
** I confirm that I have never been convicted nor charged with cruelty or neglect of any animal.*

I hereby declare that I have read through the Adoption Contract, and that I agree and acknowledge that the above contract is legal and binding.

ADOPTER NAME - Prof/Dk/Mr/Mrs/Ms (including initials) JOHAN OLIVIER
 HOME ADDRESS: 17 VAL DAIRIE, PETERSFIELD EXT, ID/PASSPORT NO.: 52119 5028 087
 TEL NO (H): _____ (B): _____
 CELL NO: 083 445 1153 FAX NO: _____
 E-MAIL: johanholivier@gmail.com
 ADOPTION FEE R1000 -00 cash / card / eft DONATION: — RECEIPT No. 21783
 VEHICLE REG. No. an 445 67 VEHICLE MAKE: TOYOTA HILUX COLOUR: WHITE
 SIGNATURE: _____ WITNESS FOR SOCIETY: [Signature]
 DATE: 16-08-2021