

ADMISSION, ASSESSMENT AND HISTORY RECORD



KENNEL No. <u>Dead</u>				C ADMISSION No. <u>13535</u>		
Stray	Surrender	Abandoned	Returned	Impounded	Confiscated	Request for euthanasia
Date in <u>11/04/22</u>			Time in <u>13:50</u>		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 <u>X</u>	Other species (Specify)			
	Breed	<u>OSH</u>		Colour and Markings	<u>Beige</u>	
	Condition	<u>Dead</u>		Sex	<u>Age ± 24rs</u>	
	Temperament	<u>Dead</u>		Sterilisation details	<u>Name</u>	
	Coat <u>Short</u>	Tail <u>Long</u>	Teeth Condition <u>Good</u>	Ears <u>UP</u>	Size <u>Large</u>	
	Area found / collected from <u>Benns Pharmacy</u>					Date <u>11/04/22</u>
	Reason for surrender <u>DOA</u>					

ASSESSMENT			Surrendered by				Name <u>Lenie</u>	
GOOD WITH: Yes No			Found by					
Children			Residential Address		<u>144 Kingsway Ave</u>			
Cats					<u>Brakpan</u>			
Other Dogs			Postal Address					
Livestock/other			Tel (H) <u>011 7409213</u>		Tel (W)		Cell	
DO THEY: Yes No			Email					
Jump Fences			Donation R		Cash	Card	EFT	(Receipt No.)
Run Away								
COMMENTS: <u>N/A</u>			PLEASE INSIST ON A RECEIPT					

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

STATEMENT OF SURRENDER	
I do hereby certify that <u>DO</u> / I DO NOT own the animal/s described above, that <u>IT IS</u> / 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 <u>See Attached Form</u>	Witness for Society <u>SSCS (John)</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: _____

**COLLECTION
REPORT****1732**
Collection No.DATE OF COLLECTION: 11/04/22 TIME: 13h10**CALLER DETAILS:**

NAME & SURNAME: _____

ADDRESS: Bens Pharmacy

E-MAIL: _____

TEL: _____ CELL: _____

DESCRIPTION OF COLLECTION:Collect dead stray cat.**REPORT OF COLLECTION:**

DATE RESPONDED: _____ TIME RESPONDED: _____

VEHICLE USED: _____

START MILEAGE: _____ END MILEAGE: _____

ADMISSION NUMBER: _____

DESCRIPTION OF ANIMAL: Type: (Dog / Cat / Sheep / Etc)

Breed: _____ Sex: _____ Age: _____

Colour and markings: _____

Condition of animal: _____ Name: _____

Name of Collector: _____ SIGNATURE: _____

NOTE: A copy of the Admission form must be attached to this report.

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Date in	<u>11/04/22</u>		Time in	<u>13:50</u>	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	<u>DSH</u>		Colour and Markings <u>Beige</u>		
	Condition	<u>Dead</u>		Sex	Age <u>2 yrs</u>	
	Temperament	<u>Dead</u>		Sterilisation details	Name <u>—</u>	
	Coat	Tail	Teeth Condition	Ears	Size	
	<u>Short Long</u>		<u>good</u>	<u>up</u>	<u>Long</u>	
	Area found / collected from	<u>Bennis pharmacy</u>				Date <u>11/04/22</u>
	Reason for surrender	<u>Dead</u>				

ASSESSMENT		Surrendered by	Name	<u>Denit</u>
GOOD WITH:	Yes No	Found by		
Children	☒ ☐	Residential Address	<u>144 Kingsway Ave</u>	
Cats	☒ ☐		<u>Brakpan Daleries</u>	
Other Dogs	☒ ☐	Postal Address		
Livestock/other	☒ ☐	Tel (H)	Tel (W)	Cell
DO THEY:	Yes No	<u>011 740-9213</u>		
Jump Fences	☒ ☐	Email		
Run Away	☒ ☐	Donation R	Cash	Card
COMMENTS:			EFT	(Receipt No.)
<u>N/A</u>		PLEASE INSIST ON A RECEIPT		

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

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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: _____