

ADMISSION, ASSESSMENT AND HISTORY RECORD

AEEJ18044

Reserved



KENNEL No. <u>135</u>				ADMISSION No. <u>13928</u>			
Stray ☒	Surrender ☐	Abandoned ☐	Returned ☐	Impounded ☐	Confiscated ☐	Request for euthanasia ☐	
Date in <u>29/4/22</u>			Time in <u>11.</u>	Date for release <u>✓</u>			

IDENTIFICATION & LOST AND FOUND			Lost & Found checked ☐	Yes ☐	Lost & Found Date checked <u>-</u>
Microchip / Collar or ID tag found ☒	Yes ☐	Date scanned or checked <u>29/4/22</u>	Microchip or ID Tag number <u>900141000187218</u>		

DESCRIPTION & HISTORY	Dog ☐	Cat ☒	Other species (Specify)
	Breed <u>DSIT</u>	Colour and Markings <u>Siel Douch</u>	
	Condition <u>5000</u>	Sex <u>Female</u>	Age <u>± 4 months</u>
	Temperament <u>5000</u>	Sterilisation details <u>Not</u>	Name <u>-</u>
	Coat <u>Short</u>	Tail <u>Long</u>	Teeth Condition <u>-</u>
	Ears <u>UP</u>	Size <u>Small</u>	
	Area found / collected from <u>73 Denver Road</u>	Date <u>29/4/22</u>	
Reason for surrender <u>Scary</u>			

ASSESSMENT	GOOD WITH: Yes ☐ No ☐	Surrendered by <u>Name</u> <u>Gwen Tunnings</u>		
	Children ☐	Found by <u>Name</u> <u>Gwen Tunnings</u>		
	Cats ☐	Residential Address <u>73 Denver Road</u>		
	Other Dogs ☐	<u>BUSKPSL</u>		
	Livestock/other ☐	Postal Address <u>-</u>		
	DO THEY: Yes ☐ No ☐	Tel (H) <u>-</u> Tel (W) <u>-</u> Cell <u>0769724258</u>		
	Jump Fences ☐	Email <u>-</u>		
	Run Away ☐	Donation R <u>-</u> Cash ☐ Card ☐ EFT ☐ (Receipt No.) <u>✓</u>		
	COMMENTS:			
	<u>N/A</u>			

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 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 _____	Witness for Society <u>BRG</u>

FOR OFFICE USE: PENDING ADOPTION	Details of second Applicant
Details of first Applicant <u>T. Kingma</u>	Details of third Applicant

Claimed ☐ Adopted ☒ Euthanased ☐ Died ☐ Other ☐ On Date: 19/05/22



BRAKPAN SPCA
ADOPTION APPLICATION

DEPOSIT INVOICE #: 9682 (cash)

ADOPTION FEE INVOICE #: 9706

PLEASE NOTE: THIS IS A LEGAL DOCUMENT

**R100 IS PAYABLE AS A NON-
REFUNDABLE DEPOSIT.**

**ONLY ONCE A DEPOSIT HAS BEEN PAID, THE ANIMAL YOU ARE APPLYING FOR WILL BE RESERVED.
WE RETAIN THE RIGHT TO TURN DOWN AND DENY THIS APPLICATION AT OUR OWN DISCRETION.**

FOR OFFICE USE

EMAIL: _____ DATE: _____ TIME: _____
NOTES: 13928 - Siel point. ♥ Date: _____
Admission Form No: 13803 + 13801
Kennel No: B7B5 + B4 + B7 + B1
Breed: DSH
13699 + 13803 + 13718
13928

PLEASE READ CAREFULLY AND ANSWER EVERY QUESTION ACCURATELY AND TRUTHFULLY.

IF YOUR APPLICATION IS INCOMPLETE, YOUR APPLICATION WILL BE DENIED.

**IF THE ADOPTION PAYMENT HAS NOT BEEN MADE WITHIN 48 HOURS OF YOUR PROPERTY CHECK HAVING BEEN DONE, YOUR
APPLICATION WILL BE TERMINATED**

Title: Ms Name and Surname: Tamryn Candice Kingma

Identity Number: 9203310311080 Occupation: Attorney

Residential Address: 9 Lark Street (Medley House)
Anzac Town: Brakpan

Tel (Home): _____ Tel (Work): _____

Tel (Cell 1): 0823871652 Tel (Cell 2): 0815934816

Email: _____

Do You Run A Business From Your Home: YES ☒ NO ☐

Is Your Property Properly Enclosed With A Fence / Wall: YES ☒ NO ☐

Height Of Fencing / Walling: ± 2,5m Type Of Fencing / Walling: Wall

Do you have a swimming pool: YES ☐ NO ☒

Have You Previously Adopted From An SPCA: YES ☒ NO ☐

If YES, Which Branch: Sandton When Did You Adopt From The SPCA: May 2021

What Breed Of Dog/Cat Are you Interested In: Cat

Who Are You Adopting The Animal For: Us. (myself & husband)

Reason For Wanting An Animal: For companionship & for loves.

What Kind Of Food Will You Feed Your New Pet: Whiskers

Will You Ever Chain A Dog: YES ☐ NO ☒

Will the animal be used for security purposes: YES ☐ NO ☒

How Many Pets Do You Currently Own:

Dogs: 0 Cats: 0 Other: 0

Details of Animals On Your Property:

(STERILISED ANIMALS ARE UNABLE TO HAVE PUPPIES / KITTENS)

BREED: _____	M ☐	F ☐	STERILISED: YES ☐	NO ☐
BREED: _____	M ☐	F ☐	STERILISED: YES ☐	NO ☐
BREED: _____	M ☐	F ☐	STERILISED: YES ☐	NO ☐
BREED: _____	M ☐	F ☐	STERILISED: YES ☐	NO ☐
BREED: _____	M ☐	F ☐	STERILISED: YES ☐	NO ☐
BREED: _____	M ☐	F ☐	STERILISED: YES ☐	NO ☐

Have You Ever Owned An Animal Which Has Died From The Following?

Distemper / Gastro-Enteritis / Parvovirus / Snuffles / Biliary

YES ☐ NO ☒

Can Afford Private Veterinary Fees:

YES ☒ NO ☐

Who Is Your Current Veterinarian: St. Francis Animal Clinic

What Happened To Any previous Pets You Have Owned?

DIED OF ILLNESS ☒ OLD AGE ☒ RUN AWAY ☐ GIVEN AWAY ☐ OTHER: _____

I Would Like The Animal To Sleep Outside	YES	<u>NO</u>
I Would like an affectionate animal	<u>YES</u>	NO
I would like an aggressive animal	YES	<u>NO</u>
I would like an animal that is good with other dogs / cats	<u>YES</u>	NO
I would like an animal that needs grooming:	<u>DAILY</u>	<u>MONTHLY</u>
I have experience with training	<u>YES</u>	NO
Someone is at home:	<u>FULL DAY</u>	<u>HALF DAY</u>
		<u>SELF-GROOMING</u>
		<u>BASIC BEHAVIOUR</u>
		<u>NIGHTS & WEEKENDS</u>

PLEASE NOTE:

- IF YOU LIVE IN A TOWNHOUSE / COMPLEX / RENTED PROPERTY, WE WILL REQUIRE A LETTER FROM YOUR BODY CORPORATE ALLOWING YOU PERMISSION TO ADOPT THE ANIMAL. _____ Pls Initial de
- CERTAIN BREEDS WILL REQUIRE A COMPATIBILITY TEST WITH THE PETS YOU CURRENTLY OWN. YOU WILL NEED TO BRING YOUR ANIMALS IN IF REQUESTED TO DO SO. _____ Pls Initial de
- WE WILL TRY OUR BEST TO CONDUCT YOUR PROPERTY CHECK WITHIN 48 HOURS BUT PLEASE UNDERSTAND THAT WE DO HAVE CRUELTY COMPLAINTS TO ATTEND TO, WHICH DO TAKE PREFERENCE. _____ Pls Initial de
- IN THE EVENT OF YOU LIVING IN AN AREA OUTSIDE OF BRAKPAN, WE CANNOT BE HELD RESPONSIBLE FOR THE TIME IT TAKES FOR YOUR LOCAL SPCA TO CONDUCT THE PROPERTY CHECK. _____ Pls Initial de
- THE DOCUMENTATION REQUIRED TO COMPLETE YOUR APPLICATION MUST BE SENT TO THE BRAKPAN SPCA WITHIN 48 HOURS OF SIGNING THE APPLICATION, FAILURE TO COMPLY WILL RESULT IN THE APPLICATION BEING CANCELLED. _____ Pls Initial de

Owners Signature

Brakpan SPCA Witness

I.D. - Copy	MUST SEND	PROOF OF RESIDENCE	MUST SEND	Approval to own an animal (if Applicable)	MUST SEND
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DRIVING LICENCE **SOUTH AFRICA**

CARTA DE CONDUCAO
CS KINCHA

ID No: 02/8405085193087 **MALE**

Birth: 09/05/1984ZA Restriction:

Licence Number: 00430010R130 No: 1

Valid: 24/11/2021 - 23/11/2025

Issue: ZA

Code: B

Vehicle restriction: 0

First name: [Signature]

07/08/2011



MEDLEY HOUSE BANQUETING - LETTER OF APPOINTMENT:

MEMORANDUM OF AGREEMENT MADE AND ENTERED INTO BY AND BETWEEN

MEDLEY HOUSE BANQUETING cc

(Hereinafter referred to as "The Employer") AND

CRINTON STANLEY KINGMA

(Hereinafter referred to as "The Employee")

The parties to this agreement, as listed below, hereby agree as follows:

Employer: Medley House Banqueting cc
Address: Medley House
9 Lark Street
Anzac
Brakpan
Contact Number: 011 740 1272 or 082 925 3727

Employee:
Surname: Kingma
Names: Crinton Stanley
ID Number: 8405085193087
Address: 9 Lark Street
Anzac
Brakpan
1541
Contact Number: 081 893 4816

Emergency Contact:

Name: Tamryn
Contact Number: 082 387 1652
Relation: Wife

Brakpan



Society for the Prevention Dierebeskermings- of Cruelty to Animals vereniging

Incorporated Association not for gain – Ingelyfde Vereniging sonder winsoogmerk
KENNELS/HOKKE: 96 DENNE RD/WEG, WITPOORT, BRAKPAN

Reg. No. 001-910 NPO

☒ 407
Brakpan
1540
☎ 011 742 2007
011 743 1076
083 696 9052

STERILISATION CONTRACT

ADOPTION ☒ ALIMONY ☐ OUTREACH ☐ MEDICAL ☐ CLAIMED ☐

DATE: 18/05/22 ADMISSION NUMBER: 13928

NAME & SURNAME: Tamryn Kingma.

ADDRESS: 9 Lark Street, Medley house.

CELL NUMBER: 082 387 1652 E-MAIL ADDRESS: _____

PET INSURANCE: YES / NO

DOG ☐ CAT ☒ BREED: DSH AGE: ± 5 months GENDER: Female

NAME OF ANIMAL: BeaBua DESCRIPTION: Siel point FULLY VACCINATED: YES / NO

Is your dog/cat pregnant? YES / NO Is your dog/cat on heat? YES / NO SPAY / NEUTER

Does your dog/cat have vaginal discharge? YES / NO STERILISATION DATE: 18/05/22

HISTORY

Any prior procedure using anesthetic? If so, please give date and nature of procedure:

N/A

Any medical conditions (e.g. diabetes, epilepsy or problems with anesthetic)?

N/A

Any current medication? N/A Microchip: N/A

TERMS & CONDITIONS OF STERILISATION

1. If the adopted animal is not sterilised on the due date mentioned above, the SPCA reserves the right to enter the above property and confiscate the animal. No money will be refunded.
2. The adopted animal cannot be passed on to a new owner. Please see clause 2 of the adoption contract.
3. The SPCA and its Veterinarian will not be held liable for any loss, theft, sickness, injury or death of any animal admitted for sterilisation. All reasonable precaution will be taken whilst the animal is in the SPCA's care. The SPCA does not have overnight staff to monitor animals after surgery.
4. It is understood that the signature on this document is that of the legal owner of the animal. Should it not be that of the legal owner, you are advised that you will have no legal recourse to take any action against the SPCA.
5. Failure to collect and pay the outstanding monies within (7) days of the animal's sterilization date shall result in the SPCA considering the animal to have been abandoned and they shall do with the animal as they deem fit. No further correspondence shall be entered into.
6. I understand that any procedure involving anesthetic does carry certain risks for the animal involved even though all reasonable precaution will be taken whilst the animal is in the care of the SPCA. I further understand that the SPCA Clinic is not equipped to deal with emergencies to the same extent as most private veterinary practices.
7. **Should your dog/cat be found to be pregnant/on heat/pyometra during sterilisation, a MINIMUM of R300-00 surcharge will apply.**
8. It is not a requirement that the BRAKPAN SPCA signs this contract for it to be effective and it will come into effect on the owner's/adapters signature.

I have read and fully understand the conditions above, which I accept unconditionally.

Signature of Owner/Adopter: 

Brakpan

Society for the Prevention Dierebeskermings- of Cruelty to Animals vereniging



Incorporated Association not for gain – Ingelyfde Vereniging sonder winsoogmerk
KENNELS/HOKKE: 96 DENNE RD/WEG, WITPOORT, BRAKPAN

Reg. No. 001-910 NPO

☒ 407
Brakpan
1540
☎ 011 742 2007
011 743 1076
083 696 9052

OFFICE USE ONLY:

WITNESS FOR SOCIETY: [Signature]

VET PRACTICE: Northmead

DATE: 18/05/22

VET USE ONLY:

VET NAME: Dr Macdonald

VET PRACTICE: NORTHMEAD VET CLINIC

VET SIGNATURE: [Signature]

DATE: 18 May 2022

Mark Below Relevant

Mark Below If Relevant

☒ SPAYED / NEUTERED

☐ ON HEAT / PREGNANT / OTHER COMPLICATIONS(Describe under Notes)

NOTES: _____

IDENTIPET REGISTRATION FORM**NB**SUCCESSFUL RECOVERIES DEPEND ON
ACCURATE AND COMPLETE INFORMATION**900141000187218**

Microchip Number

**PLEASE COMPLETE ALL INFORMATION ACCURATE
OWNER INFORMATION**

Mr / Mrs / Miss / Dr

I.D Number

Residential
AddressDownload the Identipet mobile App
from your Play / App store today.
Sign up to be part of our pet rescuer
network**Identipet**
SINCE 1989

Home number

Work Number

Cell Number

Alternative number

E-mail address

YOUR PETS INFORMATION

Type of Animal	Dog	☒ Cat	Horse	Bird	Reptile	Game	Other Specify
Name of Animal	Blue				Breed	DSH	
Description / Colour	Seal point				Sex	M	☒ F
Sterilized	☒ Y	☐ N	Date of Birth		2021		

MICROCHIP IMPLANTER INFORMATION

Implanter Name	Blue	Date of Implant	18/05/22
I certify that I have today implanted the above described animal in the prescribed implant site with the implant number as recorded above.		This implant carries a lifetime guarantee Registration is included free of charge I agree to receive communication regarding Identipet services I agree to ensure that my details stays up to date See reverse for conditions of sale	I accept the conditions of Sale Owner's Signature
Microchip Implanter's Signature	Microchip Implanter's P.I.N Number		

Original copy - IDENTIPET

Second copy - IMPLANTER

Last copy - OWNER

**Register online, email or Mobile App: www.identipet.com • Info@identipet.com
Identipet, P.O. Box 215, Lanseria 1748 • Fax: (086) 671-9189 • Tel: (011) 957-3456**

READY STEADY PRINT 011 025 0057



ADMISSION No

13699 + 13803 +
13718

PRE AND POST HOME INSPECTION FORM

PASSED: ☒ YES DATE UNDERTAKEN: 17/05/2022 TIME: 15:30

NAME OF APPLICANT: Tamryn Kingma

ADDRESS: 9 Lark Street, Madley House

HOME TEL No: CELL No: 082 387 1652

ANIMAL(S) ADOPTING: DSH

SEX: male & 2x females AGE:

PRE- HOME INSPECTION:

PROPERTY DESCRIPTION			
Type of fence: B- wall.	Height of fence: 2m.		
Any sign of Kennel/Shelter?	YES ☒ / NO ☐	Any sign of Chain/Runner?	YES ☐ / NO ☒
Is the front yard separated from the back?	YES ☒ / NO ☐	If yes, what partitioning?	Wall.
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?	NA.

DESCRIPTION OF ANIMALS ON PROPERTY					
	1	2	3	4	5
BREED	/	/	/	/	/
SEX	/	/	/	/	/
AGE	/	/	/	/	/
STERILISED	YES ☐ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐

OTHER INFORMATION / COMMENTS
All good.

PROPERTY APPROVED FOR THE FOLLOWING ANIMALS:

☒ SMALL DOGS☒ CATS☒ MEDIUM DOGS☐ EQUINE☒ LARGE DOGS☐ OTHER (specify) _____

INSPECTED BY: Elzette SPCA: Brakpan SIGNATURE: Elzette

POST HOME INSPECTIONS

DATE	RESULT	REMARK	BY WHOM

DIAGRAM OF PROPERTY ON REVERSE OF THIS PAGE



ADMISSION No 13928

ADOPTION CONTRACT

UITPLASINGSKONTRAK

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.

I do hereby confirm and undertake that:

- (1) I am over eighteen (18) years of age.
- (2) 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.
- (3) I will give the animal a fair chance to adjust to its new home.
- (4) I understand donations are not refundable or transferable.
- (5) I will feed and house the animal to the Society's satisfaction.
- (6) 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.
- (7) I can afford the services of a private veterinary practitioner.
- (8) I will ensure that vaccinations are kept up to date and in the case of injury or illness, professional veterinary treatment will be provided.
- (9) The pet I am adopting has received an initial vaccination and has been de-wormed by the Brakpan SPCA. I am satisfied with the current health status of the animal I am adopting. I understand that should the animal fall ill after being adopted, I will not hold the SPCA liable for any vet bills that may be incurred. If problems arise with the sterilisation wound of the animal, I may bring the animal to the Society to be attended to by its veterinarian at no charge to myself.
- (10) I will ensure that the animal is sterilised as stipulated by the Society.
- (11) I will identify my dog with a collar and identification tag - only elasticised collars must be used on cats.
- (12) My property is adequately enclosed and at no time shall I knowingly allow my dog to roam the streets.
- (13) I will notify the Society within forty-eight (48) hours should the animal die or go missing.
- (14) I know and understand the "By-Laws Pertaining to Dogs" of the Municipality in which I reside.
- (15) 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 contract, and I will allow the Society to repossess the animal if in the Society's opinion, the terms of this contract are not being reasonably adhered to.
- (16) I will not use or allow the animal to be used as a watchdog on any industrial or commercial premises.
- (17) I will notify the Society of any change of address or telephone number in writing by registered post within seven (7) days.
- (18) I undertake to take all reasonable steps to maintain the animal in a good and healthy state and to ensure the animal has adequate food and water at all times. Should the animal be found at any time in a condition which the Society, or its representative, is of the view is not healthy, then the Society may forthwith repossess the animal.
- (19) I undertake to refrain from surgically altering any part of the animal's body other than for medical reasons. I understand that cropping ears and docking tails for cosmetic reasons is against the Law.
- (20) I agree that if I breach any of the above terms, the SPCA will have the right to enter upon my property and take possession of the animal. I will then forfeit all rights and claims to the animal, and will have no right of action or recovery against the SPCA for any reason whatsoever.

Hierdie diër is aan u oorhandig met die vertroue dat u die diër 'n goeie tuisle sal bied, met verantwoordelike en liefdevolle sorg.

Eienaarskap van 'n diër gee baie plaas en tevredenheid. Daar is ook verantwoordelikhed en verpligtinge wat nagekom moet word. Die feit dat hierdie diër in ons sorg was, dui gewoonlik daarop dat iemand hulle plig versuim het.

- (1) Ek ower as agtien (18) jaar is.
- (2) Indien ek vir enige rede nie langer die diër kan versorg nie, onderneem ek om dit alleenlik aan die DBV terug te besorg. As ek om enige rede nie daartoe in staat is om die diër te hou nie sal ek nie besit van die diër afskiet nie tensy ek dit aan die DBV teruggee. Ingeval ek nie so optree nie, aanvaar ek aanspreeklikheid om alle onkoste aan die DBV te betaal wat hulle mag aangaan in die verkryging van bevestiging dat die diër by 'n geskikte persoon met aanvaarbare huis en erf gehuisves is. Ingeval dit nie die geval is nie, aanvaar ek ook aanspreeklikheid vir alle onkoste wat die DBV mag aangaan, insluitende die regsonekoste volgens 'n prokureur en klient skaal, in die terug verkryging van die diër.
- (3) Ek sal die diër 'n redelike kans gee om aan sy nuwe tuisle gewoon te raak.
- (4) Ek begryp dat donasies nie oordraagbaar is of terugbetaal word nie.
- (5) Ek onderneem om die diër te versorg en te huisves na die Vereniging se tevredenheid.
- (6) Ek sal nie die diër verketter of gehok hou nie, en aanvaar dat indien die diër wat in my besit vasgeketter of gehok gevind word, die Vereniging dit doodlik sal vernietig.
- (7) Ek kan die dienste van 'n private veeartsenrykundige bekostig.
- (8) Ek onderneem om die diër se nodige inenting op datum te hou en in die geval van siekte of heserings sal ek 'n veearts se dienste gebruik.
- (9) Die diër wat ek aanneem het die nodige inenting en ontruimings ontfang en die is toegedien deur die DBV. Ek is tevrede met die huidige status van die diër wat ek aanneem en ek verstaan dat as die diër siek word nadat ek die diër aangeneem het dat ek nie die DBV vir enige rekeninge wat ek aangaan mag verantwoordlik hou nie. Sou die diër siek word as gevolg van die wond na sterilisasie, mag ek die diër na die DBV bring vir behandeling deur 'n veearts, die diens sal teen geen koste gelewer word.
- (10) Ek onderneem om te seker te maak dat die diër gesteriliseer word soos deur die Vereniging voorgeskryf.
- (11) Ek onderneem om my hond te identifiseer met behulp van 'n halsband en naamplaatjie - slegs rekbare plaatjies mag vir katte gebruik word.
- (12) My erf is behoorlik omhein en ek sal nie toelaat dat my hond in die straat rondloop nie.
- (13) Ek sal binne agtien-veertig (48) uur die Vereniging in kennis stel indien die diër siek of verloor raak.
- (14) Ek verstaan en erken die "Verordeninge Aangaande Honde" van die Munisipaliteit waarin ek woonagtig is.
- (15) Ek sal toelaat dat 'n gemagtigde persoon van die Vereniging my erf kan besoek van tyd tot tyd, om te verseker dat die diër wel versorg word soos in die Uitplasingskontrak uiteengesit is. Ek sal toelaat dat die Vereniging die diër in besit mag neem indien die beleid en reëls van die Uitplasingskontrak nie redelik nagekom word nie.
- (16) Ek sal nie die diër gebruik of toelaat dat die diër as 'n waghoond gebruik word op enige industriële of kommersiële perseel nie.
- (17) Ek sal die Vereniging binne sewe (7) dae per geregistreerde pos in kennis stel van enige verandering van adres.
- (18) Ek onderneem om die diër in goeie gesondheid te hou en toe te sien dat die diër genoeg voedsel en water kry ten alle tye. Indien die diër teen enige tyd in 'n swak kondisie gevind word kan die Vereniging of sy verteenwoordiger die diër terugsaam.
- (19) Ek onderneem om geen gedeelte van die diër se liggaam chirurgies te laat verander anders as vir mediese redes nie. Ek verstaan dat die sny van ore en sterte vir kosmetiese redes teen die Wet is.
- (20) Ek stem hiermee toe dat as ek in gebreke is van enige van die bogenelde voorwaardes, sal die DBV dan geregtig wees om my eiendom te betree, en die diër in my sorg te bring te heeltemal weens ek geen reg tot enige aksie of eis teen die DBV vir enige rede toegestaan het nie.



900141000187218

ADOPTER/CLAIMANT

NAME-Prof/Dr/Mr/Ms (including initials): TE Kingma

RESIDENTIAL ADDRESS: Medley House, Hank Street, Anzac, Brakpan

RESIDENTIAL TELEPHONE No.: 082 367 1652

POSTAL ADDRESS: A3 Above

BUSINESS ADDRESS: A3 Above

BUS. TELEPHONE No.: 082 387 1652

DONATION/CHARGE FOR ANIMAL: R 750-00

CASH/CHEQUE/CARD RECEIPT No.: PEOPLE 03 GP

ID/PASSPORT/PENSION No.:

VEHICLE REG. No.:

SIGNATURE: [Signature]

WITNESS FOR SOCIETY: [Signature]

DATE: 18/05/22