



APPLICATION TO ADOPT AN ANIMAL

PLEASE NOTE: We retain the right to decline this application

The following documents to be attached: - ID, proof of residence, proof that pets are allowed.

NAME - Prof/Dr/Mr/Mrs/Ms (including initials): Bennie Dames

HOME ADDRESS: Unit 2 Hillval Farm R44 Idapmuts

ID NO.: 5708195110088

POSTAL ADDRESS: Same as above

TEL NO (H): _____ (B): _____

CELL NO: 082922 7789 FAX NO: _____

E-MAIL: benniedames3@gmail.com

Address where animal will be kept: Same as above

Reason for wanting an animal: Companionship

Occupation: Personer

Do you own or rent your property: Rent Do you have consent from (owner) / Body Corporate? Yes

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

Reason for wanting an animal: _____

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? _____

Can you afford private veterinary fees? Yes Who is your vet? Boulavord

How many animals live on your property DOGS 1 CATS _____ OTHER _____

What are the sexes of your animals? DOGS: Male _____ Female 1 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 1 CATS _____ OTHER _____

Which animals do you still have, and what happened to the others? 1 Dog

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

Full description of the fencing and gate: Electric fence gate under cover Height: 2m

What shelter is provided: OUTDOORS _____ KENNEL Yes OTHER Indoors

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 12.12.24