



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):

Me. Melina Larnes

HOME ADDRESS:

23 Bain St
Wellington

ID NO.:

7109240300089

POSTAL ADDRESS:

TEL NO (H):

(B):

CELL NO:

0820924770

FAX NO:

E-MAIL:

melina@larnes.co.za

Address where animal will be kept:

23 Bain

Reason for wanting an animal:

Friend for my Jessie

Occupation:

Educator

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?

A cheerful breed

Can you afford private veterinary fees?

Yes

Who is your vet?

Wagh?

How many animals live on your property

DOGS

1

CATS

OTHER

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

CATS

OTHER

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

The same one

Is your property fenced and has a proper gate?

Yes

Will you chain/cage an animal?

No

Full description of the fencing and gate:

Tall fence with gates

Height:

2m

What shelter is provided:

OUTDOORS

KENNEL

OTHER

Indoors

Have you previously had pets from an SPCA?

Yes

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

[Signature]

Date of application

11/9/24