Dixie

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): Lizaan, Tove Bernehod Pretorius

HOME ADDRESS: Park street 26 D

Wellington ID NO.: 8804110187082

POSTAL ADDRESS: 7655

TEL NO (H): / (B): /

CELL NO: 083 716 9774 FAX NO:

E-MAIL: Lizaanlmp at hotmail.co.za

Address where animal will be kept:

Reason for wanting an animal: Need A new member to the family

Occupation: Self employed

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? one in wellington

How many animals live on your property DOGS / CATS / OTHER /

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

Are all your animals sterilised? Give details /

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?

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

Full description of the fencing and gate: very secure. Height: Normal height

What shelter is provided : OUTDOORS KENNEL OTHER Indoors 130

Have you previously had pets from an SPCA? / Are there children under the 10 years in your household? /

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** 29/01/25