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): MERCIAL ADONIS

HOME ADDRESS: 5- PARAKEET STR.

WELLINGTON ID NO.: 7207230207080

POSTAL ADDRESS: _____

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

CELL NO: 0760518842 FAX NO: _____

E-MAIL: Madonis@bmedia.co.za

Address where animal will be kept: 5- PARAKEET STR

Reason for wanting an animal: Companionship

Occupation: _____

Do you own or rent your property: _____ Do you have consent from owner / Body Corporate? _____

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? _____

How many animals live on your property DOGS 2 CATS _____ OTHER _____

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

Are all your animals sterilised? Give details Y

How many dogs and cats have you owned over the past 3 years? DOGS 2 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: _____ Height: _____

What shelter is provided : OUTDOORS _____ KENNEL _____ OTHER _____

Have you previously had pets from an SPCA? NO Are there children under the 10 years in your household? yes

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** 2025-04-30