



CRUELTY COMPLAINT SHEET AND INSPECTOR'S REPORT

045
Complaint No.

DATE OF COMPLAINT: 6/2/23 TIME: 09:34

COMPLAINANT DETAILS:
 NAME & SURNAME: SPCA
 ADDRESS: _____
 E-MAIL: _____ TEL: 044 693 0524 CELL: _____

ADDRESS OF PREMISES / PERSON TO BE INVESTIGATED:
 NAME & SURNAME: _____
 ADDRESS: M201a Street Pozies
 E-MAIL: _____ TEL: _____ CELL: 078 820 2915

NATURE OF COMPLAINT:
Sick puppy - vomiting not eating.

Complainant notified:	Date:	Time:
Telephonically	E-mail	In person

INVESTIGATION REPORT

DATE: 26/02/23 TIME: 09:25 WARNING No _____

Access granted by: Yamke/ni nterha

List animals seen:

male unspayed
scabie name
black x breed
bad condition

Concerns	Yes	No
Water available	☒	☐
Adequate shelter available	☒	☐
Adequate space available	☒	☐
Clean living environment	☒	☐
Animal/s chained / tethered / caged	☐	☒
Animal/s in good condition	☒	☐
Veterinary problems / health concerns	☒	☐
Note: Any concerns noted in this table must be explained in detail in the Inspector's report.		

Report/Findings:

On arrival I inspect the property and find that the dog is sick vomiting and does not eat I test the dog for parvovirus. Tested and found positive for parvovirus refer to PDSA for treatment.

Action taken: (ie warning, education, seize, etc)

INSPECTOR: R. L. S. SIGNATURE: [Signature]

FOLLOW-UP INSPECTIONDATE: 07/02/23TIME: 10:04

WARNING No _____

Access granted by: Yamkelani Ntatha

List animals seen:

Concerns	Yes	No
Water available	☒	☐
Adequate shelter available	☒	☐
Adequate space available	☒	☐
Clean living environment	☒	☐
Animal/s chained / tethered / caged	☐	☒
Animal/s in good condition	☒	☐
Veterinary problems / health concerns	☐	☒
Note: Any concerns noted in this table must be explained in detail in the Inspector's report.		

Report/Findings:

On arrival I see that the dog is better. Tail is swinging. No signs of vomiting, poo that is bloody. The dog is eating.

Action taken: (ie warning, education, seize, etc)

INSPECTOR: KURTSIGNATURE: [Signature]**FOLLOW-UP INSPECTION**

DATE: _____

TIME: _____

WARNING No _____

Access granted by: _____

List animals seen:

Concerns	Yes	No
Water available	☐	☐
Adequate shelter available	☐	☐
Adequate space available	☐	☐
Clean living environment	☐	☐
Animal/s chained / tethered / caged	☐	☐
Animal/s in good condition	☐	☐
Veterinary problems / health concerns	☐	☐
Note: Any concerns noted in this table must be explained in detail in the Inspector's report.		

Report/Findings:

Action taken: (ie warning, education, seize, etc)

INSPECTOR: _____

SIGNATURE: _____

Outcome of case:

No welfare concerns - NFA	Owner complied - NFA	Animal/s confiscated
Animal/s signed over	Animal/s given away	Owner moved
Charges laid	SAPS CAS No.	OB No.
If referred, to who?		Date & time:



COLLECTION REPORT

OAS
Collection No.

DATE OF COLLECTION: 06/02/23 TIME: 09:25

CALLER DETAILS:
 NAME & SURNAME: Yamkelani Netha
 ADDRESS: Aska giyan 357
Mosselbay
 E-MAIL: _____
 TEL: _____ CELL: 0788222985

DESCRIPTION OF COLLECTION:
Dog is sick vomiting and does not
eat. Tested for Parvo found positive refer
to PDSU for treatment.

REPORT OF COLLECTION:

DATE RESPONDED: 06/02/23 TIME RESPONDED: 09:29
 VEHICLE USED: Car 81297
 START MILEAGE: 387447 END MILEAGE: 387451

ADMISSION NUMBER: _____
 DESCRIPTION OF ANIMAL: Type: (Dog / Cat / Sheep / Etc)
 Breed: x breed Sex: male Age: 4 months
 Colour and markings: Black / brown
 Condition of animal: bad / sick Name: Jelous

Name of Collector: KURT SIGNATURE: *[Signature]*

NOTE: A copy of the Admission form must be attached to this report.