

ADMISSION, ASSESSMENT AND HISTORY RECORD



Garden Route

KENNEL No.				ADMISSION No. MBY0683		
Stray	Surrender	Abandoned	Returned	Impounded	Confiscated	Request for euthanasia
Date in	31-7-23	none	Time in	20:40	Date for release	

IDENTIFICATION & LOST AND FOUND			Lost & Found checked	☒ Yes ☐ No	Lost & Found Date checked
Microchip/Collar or ID tag found	☒ Yes ☐ No	Date scanned or checked	none	Microchip or ID Tag number	none

DESCRIPTION & HISTORY	Dog	Cat	Other species (Specify) 52 calves		
	Breed	Calves		Colour and Markings	Multi Colours
	Condition	Some Signs		Sex	Age less than 30 days
	Temperament	friendly		Sterilisation details	none
	Coat	Tail	Teeth Condition	Ears	Size
	Area found / collected from	Alberton			Date 31-7-23
	Reason for surrender Sign - too young				

ASSESSMENT		Surrendered by		Name	
GOOD WITH: Yes No		Found by			
Children	☒ Yes ☐ No	Residential Address		9 Gold street Alberton	
Cats	☒ Yes ☐ No	Postal Address			
Other Dogs	☒ Yes ☐ No	Tel (H)		Tel (W)	Cell 0846657105
Livestock/Other	☒ Yes ☐ No	Email		ysolie4@gmail.com	
DO THEY: Yes No	☒ Yes ☐ No	Donation R		Cash	Card
Jump Fences	☒ Yes ☐ No			EFT	(Receipt No.)
Run Away	☒ Yes ☐ No				
COMMENTS:					

PLEASE INSIST ON A RECEIPT

Confiscated: OB No: _____ Case No: _____ Inspector: _____

STATEMENT OF SURRENDER

I do hereby certify that **I DO / I DO NOT** own the animal/s described above, that **IT IS / IT IS NOT** a stray and **I DO / I DO NOT** know where it comes from. I also freely surrender all interest, if any, therein to the SPCA, and I request that the animal be dealt with as deemed advisable in the discretion of the SPCA. It is expressly agreed that neither the SPCA nor its officers and employees will incur any obligation to me on account of such disposition of said animal/s. I confirm that I am over the age of eighteen (18) years of age. **Also see "Conditions" on reversed side.**

Hiermee verklaar ek dat ek hierbo beskryf **BESIT / NIE BESIT NIE**, dat dit 'n **RONDLOPER / NIE RONDLOPER NIE** is, en dat ek **WEET / NIE WEET** waar dit vandaan kom nie. Ek doen ook vrywillig afstand van alle belange daarin, indien enige, ten gunste van die DBV en ek versoek dat die dier hanteer word soos wat die DBV goed ag. Daar word uitdrukk ooreengekom dat nog die DBV nog sy amptenare, en werknemers enige verpligtinge het, teenoor my ten opsigte van die hantering van die dier/e. Ek bevestig dat ek bo die ouderdom van agtien (18) jaar is. **Sien ook die "Voorwaardes" op die agterblad.**

Signature	Witness for Society
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FOR OFFICE USE: PENDING ADOPTION	Details of second Applicant
Details of first Applicant	Details of third Applicant

Claimed ☐ Adopted ☐ Euthanased ☐ Died ☐ Other ☐ _____ On Date: **1-8-23**

CONDITIONS / VOORWAARDES

- | | |
|---|---|
| <p>1. The Owner / Finder hereby relinquishes all ownership rights to the animal/s described on the reverse to the SPCA for disposal at its sole discretion on the understanding that the Society shall endeavour to place it in a new home or, if unable to do so, effect its painless destruction.</p> | <p>1. Die Eienaar / Vinder doen hiermee afstand van alle eiendomsreg in die dier/e, beskryf op die keersy, ten gunste van die DBV om mee te beskik volgens hul uitsluitlike diskresie met dien verstande dat die Vereniging sal poog om dit in 'n nuwe huis te plaas of, indien hul nie in staat is om dit te doen nie, om sy pynlose vernietiging te bewerkstellig.</p> |
| <p>2. If, in the opinion of a veterinarian or a qualified inspector in terms of Section 5 of Act 71 of 1962 (Animals Protection Act) an animal presented for admission is so diseased, severely injured or in such physical condition that it should be destroyed for humanitarian reasons, the Society shall have the right to effect such destruction by approved humane methods.</p> | <p>2. Indien, volgens mening van 'n veearts of 'n gekwalifiseerde inspekteur in terme van Artikel 5 van Wet 71 van 1962 (Dierebeskermingswet) 'n dier aangebied word vir toelating wat so siek, ernstig beseer of in sodanige fisiese toestand is dat dit vir menslikheidsredes vernietig behoort te word, die Vereniging die reg sal hê om so 'n vernietiging te bewerkstellig deur goedgekeurde menswaardige metodes.</p> |
| <p>3. Any charges endorsed hereon are due and payable on request.</p> | <p>3. Enige koste hierop onderskryf is verskuldig en betaalbaar op aanvraag.</p> |
| <p>4. The Society will not home any animal unsterilised.</p> | <p>4. Die Vereniging sal geen dier plaas wat ongesteëliseer is nie.</p> |

REQUEST FOR EUTHANASIA

Owners authorising signature		Witness for Society signature	
Reason for Euthanasia			

Euthanase Bottle No: _____ *Quantity used: _____ AWA: _____

CLAIMANT

Name: Prof/Dr/Mr/Mrs/Ms (including initials) _____

Residential Address: _____

Tel No (h): _____ Tel No (w) _____ Cell No: _____

Postal Address: _____

E-mail Address: _____

Reclaim Charge: _____ Added Donation: _____ Cash/EFT/Card (Receipt No.) _____

ID/Passport No: _____ Copy Attached: Yes ☐ No ☐

Vehicle Model _____ Colour _____ Reg. No: _____

Signature: _____ Witness for Society _____

Microchip / Collar and ID tag given	Yes	Microchip / ID tag details	Date
	No		

MEDICAL RECORD	
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