

ADOPTION CHECKLIST

- ☒ Admission Form
- ☒ Application for adoption
- ☒ Pre-home Inspection Report
- ☒ Adoption contract
- ☒ Copy of Identity Document or Driver's License
- ☐ Proof of Residence
- ☒ Letter from Body Corporate
- ☒ Sterilization Contract and Date of sterilization Contract March 2024
- ☒ Copy of Vaccination Record/ Certificate
- ☒ Microchip
- ☒ Microchip Registration- chip number 992003000408453

ADMISSION NO:

MBY 1645

CONTRACT NO:

MBY 0059

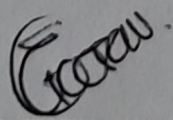
Adoptee INFO:

Name & Surname Aadi Mudra

Contact INFO: 0662389486

Completed by: Kay Tevers

Date: 19/01/2024

Manager: 

Date: 22/01/2024

FUTURE POST HOME INSPECTION (every 6 Months)	
Date of inspection	Date of inspection

This checklist must be completed and attached to the front of every adoption that has been processes.

All documents relating to a single adoption must be kept together in a single bundle, in order of checklist.

**STERILISATION CONTRACT****PLEASE READ CAREFULLY - THIS IS A LEGAL DOCUMENT**CONTRACT No. MBY 0059DATE: 19/01/2024between Mosselbay SPCA

and

Name Aadi MudraAddress 75 Hartland Lifestyle Estate, Kasuar str, HartenbosTelephone Numbers (H) _____ (B) 0662389486

to have spayed / neutered / vasectomised (delete whichever is not applicable):

Animal's Name _____ Sex Female Age 3 monthsDescription D&H TabbyOn (due date) March 2024 Adoption Form No. _____on the understanding that you will arrange to have this done at the _____
Veterinary Hospital.

1. Should the animal be taken to another Veterinary Hospital or Clinic for this surgical procedure without the written authorisation of this Society, the owner will be responsible for the payment of any fees incurred.
2. If the animal is not sterilised on the due date mentioned above, the Society **reserves the right to confiscate** the animal and **NO MONEY WILL BE REFUNDED**. The owner agrees that a member of the SPCA's staff may enter upon their premises in order to remove and/or inspect the animal.
3. This animal cannot be passed on to a new owner. The original sterilisation contract will be cancelled and a new one issued in the new owner's name free of charge.
4. In the event of the animal's death, proof must be submitted to the Society within seven (7) days.
5. The owner undertakes to bring the section 1 above to the attention of the Veterinary Practitioner who may, or will be, consulted by the owner.

I have read and fully understand the conditions above, which I accept unconditionally.

Signature of new Owner: [Signature] For SPCA: [Signature]**CONFIRMATION OF STERILISATION:**

Vet: _____ Signed: _____

Date: _____



Contract: MBY 0059

ADMISSION NO

MBY 1645

PRE AND POST HOME INSPECTION FORM DOMESTIC ANIMALS

PASSED: ☒ YES / ☐ NO

DATE UNDERTAKEN: 18/01/24 TIME: 15:5

NAME OF APPLICANT: AADI MUDRA

ADDRESS: 75 Hartland Lifestyle Estate, Hartenbos, Kasuar str.

HOME TEL No: CELL No: 0662389486

ANIMAL(S) ADOPTING: Cat

SEX: Female AGE: 3 months

PRE- HOME INSPECTION:

PROPERTY DESCRIPTION

Type and height of fence: Complex (Bricks)	Suitability of fence (i.e. small pets can't escape):
Suitable shelter? (i.e. Kennel in protected area) YES ☒ / NO ☐	Any sign of Chain/Runner? YES ☐ / NO ☒
Is the front yard separated from the back? YES ☐ / NO ☒	If yes, what partitioning?
Any hazards? (pool, rubble, razor wire, etc) YES ☐ / NO ☒	Specify:
Does applicant live at the address? YES ☒ / NO ☐	How many animals are on the property?

DESCRIPTION OF ANIMALS ON PROPERTY

	1	2	3	4	5
BREED					
CONDITION					
WELFARE (good?)					
SEX & AGE	/	/	/	/	/
STERILISED	YES ☐ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐

OTHER INFORMATION / COMMENTS

Complex lovely people
Lovely home

PROPERTY APPROVED FOR THE FOLLOWING ANIMALS:

- ☒ CATS
 ☐ SMALL DOGS
☐ MEDIUM DOGS
 ☐ LARGE DOGS

INSPECTED BY: KUK SPCA: Moseley SIGNATURE:

POST HOME INSPECTIONS

DATE	RESULT	REMARK	BY WHOM

DIAGRAM OF PROPERTY ON REVERSE OF THIS PAGE

MY OWNER

NAME **Aadi Mudra**

POSTAL ADDRESS **75 Hartland Lifestyle**
Estate, Kasuur Str., Hartenbos

STREET ADDRESS

HOME PHONE

WORK PHONE

CELLPHONE **0662389486**

BREEDER DETAILS

ME

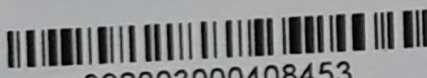
SPECIES **feline**

BREED **DLH**

COLOUR **Tabby**

SEX **♀**

DATE OF BIRTH

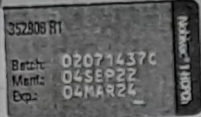
CROCHIP/TAT 
992003000408453

FEATURES/MARKS

NEXT VACCINATION DUE

DATE	DATE	DATE
1/2/2024		

I WAS VACCINATED ON

DATE	VACCINE AND BATCH NO.	VET SIGNATURE
11/1/2024	 MSD Animal Health	N.N
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	

I WAS VACCINATED ON

DATE	VACCINE AND BATCH NO.	VET SIGNATURE
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	

One of the very best things you can do to give me a long and healthy life is to vaccinate me against common diseases.
My mother gave me immunity during my first few weeks by disease-fighting antibodies in her milk.
Now it is up to you to keep my vaccinations up to date as advised by my vet!

Nobivac® DHPPI (Reg. No. G2377 Act 36/1947), Nobivac® KC (Reg. No. G2604 Act 36/1947), Nobivac® Canine-1 DAPPV (Reg. No. G3892 Act 36/1947), Nobivac® Feline-HCP (Reg. No. G3880 Act 36/1947), Nobivac® Tricat Trio (Reg. No. G3712 Act 36/1947), Nobivac® Rabies (Reg. No. G2207 Act 36/1947), Quantel® Tablets (Reg. No. G2717 Act 36/1947) Contains Praziquantel (isoquinoline) 50 mg/tablet and Fenbendazole (benzimidazole) 500 mg/tablet. Exitel Plus (Reg. No. G4226 Act 36/1947) Contains Praziquantel 50 mg, Pyrantel 50 mg (equivalent to 144 mg pyrantel embonate) and Febantel 150 mg. Exitel Plus XL (Reg. No. G4227 Act 36/1947) Contains Praziquantel 175 mg, Pyrantel 175 mg (equivalent to 504 mg pyrantel embonate) and Febantel 525 mg. Bravecto® (Reg. No. G4083 Act 36/1947) each chew contains 25 mg Fluralaner per kg body weight.

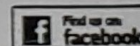
SD
Animal Health



Quantel

Exitel Plus

Exitel Plus XL



facebook.com/Bravecto South Africa

CONDITIONS / VOORWAARDES

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.
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.
3. Any charges endorsed hereon are due and payable on request.
4. The Society will not home any animal unsterilised.

REQUEST FOR EUTHANASIA

Owners authorising signature		Witness for Society signature	
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Owners authorising signature		Witness for Society signature	
Reason for Failure			

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 ☐

Copy Attached: Yes ☐ No ☐

Vehicle Model _____ Colour _____ Reg. No: _____

Signature: _____ Witness for Society _____

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

Date _____

MEDICAL RECORD

[illegible]



REPUBLIC OF SOUTH AFRICA

NATIONAL IDENTITY CARD

Surname:

STRYDOM

Names:

AADILAH ANJALI MUDRA

Sex:

F

Nationality:

RSA

Identity Number:

9010090010083

Date of Birth:

09 OCT 1990

Country of Birth:

RSA

Status:

CITIZEN



Signature:

A handwritten signature in black ink, located at the bottom right of the card, below the 'Signature:' label.

C4
light tabby

APPLICATION TO ADOPT AN ANIMAL

PLEASE NOTE: We retain the right to decline this application

The following documents to be attached: - ID, proof for residence, proof that pets are allowed.

NAME - Prof/Dr/Mr/Mrs/Ms (including initials): Mrs AAM MUDRA

HOME ADDRESS: 75 Hartland Lifestyle Estate, Hartenbos,
Kasoor Str ID NO.: 901009 0010083

POSTAL ADDRESS: " "

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

CELL NO: 066238 9486 FAX NO: _____

EMAIL: aadi.lahmudra@gmail.com

Address where animal will be kept: 75 Hartland Lifestyle Estate

Occupation: Software Quality Analyst

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 animal: Grow our family

Is the animal for yourself? Yes YES/NO

Is the animal a replacement for a pet which has died from: Distemper/Parvovirus/Snuffles/Cat Flu/Biliary No YES/NO

What breed of dog or cat are you interested in? Tabby

Can you afford private fees? Yes Who is your vet? Hartenbos Animal hospital

How many animals live on the property? DOGS? 0 CATS? 0 OTHERS —

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

Are all your animals sterilised? Give details NA

How many dogs and cats have you owned in the last 3 years? DOGS? 1 CATS? — OTHER? —

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

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

Full description of the fencing and gate: Wooden fencing Height: 1.5m

What shelter is provided: OUTDOORS — KENNEL — OTHER Indoor

Have you previously had pets from an SPCA? No Are there children under 10 in your household? Yes

Pre Home Inspection Fee: R100 Receipt No: 1542

Declaration: The above information is true and correct

ADMISSION No.
TOELATINGSNR.

MBY0059

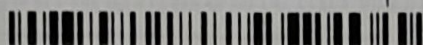


Garden Route

ADOPTION CONTRACT

DOG / CAT	Breed	Male/Female
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Microchip and or ID Tag N



992003000408453

This animal has been given
receive a good home with responsible and loving care. Ownership of an
animal yields much pleasure and satisfaction. It also has its obligations and
responsibilities. The fact that the animal has been in our care usually
indicates that someone has, in the past, failed to recognise these
responsibilities.

- I do hereby confirm and undertake that:
- I am over eighteen (18) years of age.
- All family members agree to the adoption and will abide by the conditions in the contract.
- I will not part with possession of the animal except to **return** it to the SPCA if for any reason I am unable to keep it. In the event that I fail to do so, I agree that I will be liable to pay to the SPCA all costs which they may incur in obtaining confirmation that the animal has been homed to a suitable person, with suitable premises. In the event that this is not the case, I also agree that I will be liable for all costs which the SPCA may incur, including all legal costs on an attorney and client scale, in recovering possession of the animal.
- I will give the animal a fair chance to adjust to its new home.
- I understand that donations are not refundable or transferable.
- I will feed and house the animal to the Society's satisfaction.
- I will **not chain or cage** the animal, and understand that if it is found chained or caged, it will be removed from my care immediately.
- I can afford the services of a private veterinary practitioner.
- I will ensure that vaccinations are kept up to date and in the case of injury or illness professional veterinary treatment will be provided.
- I understand that in case of illness (not injury) occurring within the first seven (7) days of adoption, I may bring the animal to the Society to be attended to by its veterinarian (at the discretion of the Society) at no charge to myself.
- I will ensure that the animal is sterilised as stipulated by the Society.
- I undertake to ensure that the animal has identification at all times, either in form of a microchip or a collar and tag - only **elasticated or quick release collars** may be used for cats.
- My property is adequately enclosed and at no time shall I knowingly allow my dog to roam the streets.
- I will notify the Society within forty-eight (48) hours should the animal die or go missing.
- I know and understand the "By-Laws pertaining to animals" of the Municipality in which I reside.
- I will permit an authorised officer of Society to visit my premises from time to time, to be assured that the animal is being treated in accordance with this Policy, and I will allow the Society to repossess the animal, if in the Society's opinion, the terms of this policy are not being reasonably adhered to.
- I will not use or allow the animal to be used as a watchdog on any industrial or commercial premises.
- I will notify the Society of any change of address in writing by registered post with seven (7) days.

* I agree to never harm, neglect, abuse or abandon the animal that I adopt.
* I confirm that I have never been convicted nor charged with cruelty or neglect of any animal.

I hereby declare that I have read through the Adoption Contract, and that I agree and acknowledge that the above contract is legal and binding.

ADOPTER NAME - Prof/Dr/Mr/Mrs/Ms (Including initials)
NAAM - Prof/Dr/Mnr/Mvr/Mej (Insluitende voorletters):

HOME ADDRESS
WOONADRES: 75 Hartland Lifestyle, Kasur sr, Hartenbos

TEL No (H):
TELEFOON Nr (H):

CELL No:
SELFOON Nr: 0662389486

E-MAIL: aadihlahmudra@gmail.com
E-POS:

ADOPTION FEE:
AANEMINGSVOOI: R 750

cash / eft / card
kontant / eft / kaart

VEHICLE REG No.
VOERTUIG REG Nr: CBS 82633

VEHICLE MAKE:
VOERTUIG MAAK: P series

SIGNATURE
HANDTEKENING: [Signature]

DATE / DATUM: 19/01/2024



Garden Route

UITPLASINGSKONTRAK

HOND / KAT	Ras	Manlik/Vroulik
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Mikroskyfie en of ID nSkyfie Nommer:

Hierdie dier is aan u oorhandig met die vertroue dat u die dier 'n goeie
tuiste sal bied met verantwoordelike en liefdevolle sorg. Elenaarskap van 'n
dier gee baie plesier en tevredenheid. Daar is ook verantwoordelikhede en
verpligtinge wat nagekom moet word. Die feit dat hierdie dier in ons sorg
was, dui gewoonlik daarop dat iemand hulle plig versuim het.

- Ek onderneem en bevestig dat:
- Ek ouer as agtien (18) jaar is.
- Alle familieleden stem saam oor die aanneming en sal al die voorwaardes in die kontrak nakom.
- Indien ek om enige rede nie langer die dier kan versorg nie, onderneem ek om dit alleenlik aan die DBV **terug** te besorg. As ek om enige rede nie daartoe in staat is om die dier te hou nie sal ek nie besit van die dier afstaan nie tensy ek dit aan die DBV terugbesorg. Ingeval ek nie so optree nie, aanvaar ek aanspreeklikheid om alle onkoste aan die DBV te betaal wat hulle mag aangaan in die verkryging van bevestiging dat die dier by 'n geskikte persoon met aanvaarbare huis en erf gehuisves is. Ingeval dit nie die geval is nie, aanvaar ek ook aanspreeklikheid vir alle onkoste wat die DBV mag aangaan, insluitende die regskoste volgens 'n prokureur en kliënt skaal, in die terugbesorging van die dier.
- Ek sal die dier 'n redelike kans gee om aan sy nuwe tuiste gewoonde te raak.
- Ek begryp dat donasies nie oordraagbaar is of terugbetaal word nie.
- Ek onderneem om die dier te versorg en te huisves na die Vereniging se tevredenheid.
- Ek sal **nie die dier vasketting of gehok hou nie**, en aanvaar dat indien die dier wel in my besit vasgeketting of gehok gevind word, die Vereniging dit dadelik sal verwyder.
- Ek kan die dienste van 'n private veeartsnykundige bekostig.
- Ek onderneem om die dier se nodige inentings op datum te hou en in die geval van siekte of beserings sal ek 'n veearts se dienste gebruik.
- Ek verstaan dat, indien die dier siek word (beserings uitgesluit), binne sewe (7) dae van aanneming, ek die dier na die Vereniging mag bring vir behandeling deur sy veearts sonder enige koste (volgens die Vereniging se diskresie).
- Ek onderneem om toe te sien dat die dier gesteriliseer word soos deur die Vereniging voorgeskryf.
- Ek onderneem om my dier te identifiseer ter alle tye met behulp van 'n mikroskyfie of halsband en naamplaatjie - **slegs rekbandjies** mag vir katte gebruik word.
- My erf is behoorlik omhein en ek sal nie toelaat dat my hond in die straat rondloop nie.
- Ek sal binne agt-en-veertig (48) uur die Vereniging in kennis stel indien die dier sterf of verlore raak.
- Ek verstaan en ken die "By-wette aangaande diere" van die Munisipaliteit waarin ek woonagtig is.
- Ek sal toelaat dat 'n gemagtigde persoon van die Vereniging my erf kan besoek van tyd tot tyd, om te verseker dat die dier wel versorg word soos in die Uitplasingsbeleid uiteengesit. Ek sal toelaat dat die Vereniging die dier in besit neem indien die voorwaardes en reëls van hierdie beleid nie redelik nagekom word nie.
- Ek sal nie die dier gebruik of toelaat dat die dier as 'n waghond gebruik word op enige industriële of kommersiële perseel nie.
- Ek sal die Vereniging binne sewe (7) dae per geregistreerde pos in kennis stel van enige verandering van adres

* Ek onderneem om nooit die dier wat ek aanneem te mishandel
verwaarloos of te verlaat nie.

* Ek verklaar hiermee dat ek nog nooit skuldig bevind of aangekla is van
wreedheid of verwaarloos van enige dier nie.

Ek verklaar hiermee dat ek die Uitplasing Kontrak gelees het, en dat
ek bevestig en erken dat die kontrak wettig en bindend is.

Aadi Mudra

ID/PASSPORT No.:
ID/PASPOORT Nr.: 9010090010083

(B):
(W):

FAX No:
FAKS Nr:

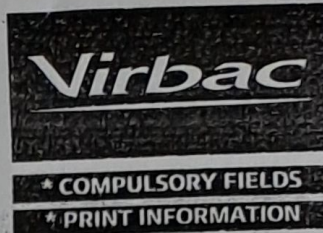
DONATION:
DONASIE:

KWITANSIE Nr
RECEIPT No. 1549

COLOUR: Blue
KLEUR:

WITNESS FOR SOCIETY:
GETUIE VIR VERENIGING: [Signature]

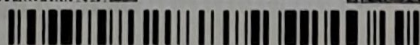
BackHome®



MICROCHIPPED ANIMAL REGISTRATION FORM

Microchip Number

TOP COPY - Practice Copy



992003000408453

VET OR WELFARE ORGANISATION

Vet Practice Number *

Vet Practice Name *

Vet Practice Phone - Daytime *

PET OWNER INFORMATION

Cell No. * 0662389486

E-mail * aadilahmudra@gmail.com

Title * MRS

Initials * A

Please note that it is the Pet Owner's responsibility to ensure that the Pet's details are registered on the BackHome Database

Only mobile numbers in South Africa and Namibia will be receiving SMS notifications.

Surname * MUDRA

Street 75 KASUAR STR

City HARTLAND LIFESTYLE ESTATE

Suburb

Area Code HARTENBOS

Country

Province

Phone - Day time

Phone - Night time

OTHER CONTACTS

Title *

Initials *

Surname *

E-mail *

Title *

Initials *

Surname *

E-mail *

Title *

Initials *

Surname *

E-mail *

CHIP DETAILS

Registration Date *

Date of Implant *

Was the Microchip implanted by this veterinary practice? Yes No

Name of Person who implanted the Chip

PET DETAILS

Pet Name

Species * FELINE

Colour TABBY

Gender Male Female

Year of Birth 2023

Breed * DLH

Markings

Sterilised Yes No

KENNEL UNION OF SOUTH AFRICA (KUSA)

Are you a KUSA Registered Member? Yes No

KUSA Registration Number

Pet Registered Name

MEDICAL

Medical Conditions

Medical Insurance Company

Medical Insurance Policy Number

Medical Insurance Phone

PROTECTION OF PERSONAL INFORMATION LAW

The client hereby agrees that his / her personal information herein supplied and / or any of his / her personal information already in possession of the veterinarian may be processed by the said Veterinarian and / or its office to bring about this agreement between the client and the veterinarian. The client further agrees that the veterinarian may forward his / her personal information to VIRBAC (Supplier of the Chip), in order for Virbac to lodge the clients personal information on their database for tracking purposes. The client also agrees that where other relevant institutions need to trace a lost animal, and they use that code on Virbac's website they will be given the personal information of the owner of said animal. The client also agrees that his / her personal information may be used by Virbac to forward him / her a Newsletter as well as to send him / her general information concerning pets. The client acknowledges that he / she has a right to object to the processing of its personal information for marketing purposes and unless expressly stated otherwise hereby consents to its personal information being used by Virbac RSA (Ltd) Pty for the above-mentioned purposes. SIGNATURE

REGISTRATION PROCESS - Please use one of the following option to register on the backhome database

1. On-line

Log onto www.backhome.co.za. Complete the registration process.

2. By Fax

Fax this completed form to BackHome on 0800 222 546 (TOLL FREE) or 0864 570 463.

Deposit must be paid before Lease Agreement is valid	☒ yes ☐ no	[Ask Seeff: 276]
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1.10	Parking fees	R 0.00
1.11	The Lease Agreement administration fee	R 150.00 monthly plus R250.00 once off
1.12	The credit check fee	R 300.00 (paid)
1.13	Rental escalation	% (Percentage) To be discussed at renewal of the Lease
1.14	Inspection fee	R 0.00 (Professional fee at 13.5%)
1.15	Surcharge	R 0.00

1.16 The Tenant's nominated bank account

Name of account holder	AAM Strydom
Bank	Discovery Bank
Bank branch	Universal
Branch code	679000
Account number	16210432930
Reference	75 Hartland

1.17 The Landlord's nominated bank account

Name of account holder	LL Mageta
Bank	ABSA
Bank branch	632005
Branch code	632005
Account number	4071335046
Reference	75 Hartland

1.18 The Landlord's contact details

Physical address	75 Hartland, Hartenbos, Mossel Bay
Postal address	As Above
Home telephone	n/a
Work telephone	n/a
Cellular	0714285796

Email	Imageta@gmail.com		
Landlord's next of kin	L. Mageta	cellular	0714285796

1.19 The Tenant's contact details

Physical address	12 Sugarleaf Rock, Magnum Road, Wilgeheuwel, Johannesburg		
Postal address	As Above		
Home telephone	n/a		
Work telephone	n/a		
Cellular	0662389486		
Email	aadilahmudra@gmail.com		
Tenant's next of kin	Ashika de villiers	cellular	0757547711

1.20 The Property Practitioner's contact details

Physical address	35 Kaap De Goede Hoop, Hartenbos, Mossel Bay		
Postal address	PO Box 391, Mossel Bay		
Home telephone	n/a		
Work telephone	0446904477		
Cellular	0828534603		
Email	elize.strydom@seeff.com		

1.21 Interest rate of 2% (Two Percent) per Month on arrear Rental up to a maximum of 24% (Twenty Four Percent) per annum

1.22	Initial Period is	12	Months
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1.23	Effective Date	1 November 2023	
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1.24	Termination Date	31 October 2024	
------	------------------	-----------------	--

1.25 Where Initial Period is greater than 24 (Twenty Four) Months

Financial benefit to the Tenant is	n/a
n/a	

1.26	Key return date and time	31 October 2024	
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1.27 Maximum occupants, permanent Vehicles and Alternative Accommodation

Maximum occupants	3
Permanent Vehicles	1