

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 04/03/2024 Done @ George SPCA



Copy of Vaccination Record/ Certificate



Microchip register 18/04/24



Microchip Registration- chip number



992003000418796

ADMISSION NO:

MBY 1996

CONTRACT NO:

MBY 0065

Adoptee INFO:

Name & Surname Wilna Joubert

Contact INFO: 0827744998

Completed by: Kay Jevens

Date: 13/04/2024

Manager:

Date: 13/04/2024

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 processed.

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

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 Wilna Joubert

HOME ADDRESS: 230 Dolphin Drive, Ashtonbay, Jeffreysbay

ID NO.: 6507020053 086

POSTAL ADDRESS: As above

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

CELL NO: 082 7744 998 FAX NO: _____

EMAIL: wilnajoubert99@gmail.com

Address where animal will be kept: As above

Occupation: Bookkeeper

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

Are you a student with consent to keep pets: _____ YES/NO

Reason for wanting animal: Love my dogs they give me a happiness, especially the rehabilitation of mistreated animals. The bond between us is a wonderful experience.

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? Rottweiler

Can you afford private fees? Yes Who is your vet? Cape Cross Vet

How many animals live on the property? DOGS? 3 CATS? _____ OTHERS _____

What are the sexes of your animals? DOGS: Male 2 Female 1 DOGS: Male _____ Female _____

Are all your animals sterilised? Give details Yes

How many dogs and cats have you owned in the last 3 years? DOGS? 4 CATS? _____ OTHER? Koi

Which animals do you still have, and what happened to the others? 3 dogs, 1 died of old age.

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

Full description of the fencing and gate: Walls with palisade on top Height: 1.8m

What shelter is provided: OUTDOORS Dogs sleep indoors at night. During the day the enclosed KENNEL _____ OTHER _____

Have you previously had pets from an SPCA? Yes Are there children under 10 in your household? _____

Pre Home Inspection Fee: One by Assis 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 03/01/2011

ADMISSION, ASSESSMENT AND HISTORY RECORD

Uda...



Garden Route

KENNEL No. <u>K 15 X 38</u>				ADMISSION No. <u>MBY1996</u>		
Stray	<u>Surrender</u>	Abandoned	Returned	Impounded	Confiscated	Request for euthanasia
Date in	<u>06/01/24</u>		Time in	<u>14H59</u>	Date for release	

IDENTIFICATION & LOST AND FOUND			Lost & Found checked	☒ Yes ☐ No	Lost & Found Date checked	<u>06/02/24</u>
Microchip/Collar or ID tag found	☒ Yes ☐ No	Date scanned or checked	<u>06/02/24</u>	Microchip or ID Tag number	<u>None</u>	

DESCRIPTION & HISTORY	Dog ☒	Cat	Other species (Specify) <u>B/L</u>			
	Breed	<u>Rottie Cross</u>		Colour and Markings	<u>15 black & tan</u>	
	Condition		Sex	<u>♀</u>	Age	<u>± 2</u>
	Temperament	<u>friendly</u>	Sterilisation details	<u>No</u>	Name	<u>Shady</u>
	Coat	<u>Mat</u>	Tail	<u>long</u>	Teeth Condition	<u>Good</u>
	Area found / collected from	<u>Ect 23</u>				
	Reason for surrender					
			Ears	<u>Down</u>	Size	<u>L</u>
				Date	<u>06/01/24</u>	

ASSESSMENT		Surrendered by		Name		<u>Melvin Muller</u>
GOOD WITH:		Found by				
Children	☐	Residential Address		<u>121 Nicolani Singel</u>		
Cats	☐			<u>XT 23</u>		
Other Dogs	☐	Postal Address		<u>No postal</u>		
Livestock/Other	☐	Tel (H)		Tel (W)	Cell	<u>0798399714</u>
DO THEY:	☐	Email		<u>No email</u>		
Jump Fences	☐	Donation R		Cash	Card	EFT
Run Away	☐	<u>None</u>				(Receipt No.) <u>None</u>
COMMENTS:						

PLEASE INSIST ON A RECEIPT

Confiscated: OB No: 1/13 Case No: 1/13 Inspector: Thambo

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 dier/e 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 uitdruklik 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	<u>Melvin Muller</u>	Witness for Society	<u>L.S. Gough</u>
FOR OFFICE USE: PENDING ADOPTION		Details of second Applicant	
Details of first Applicant		Details of third Applicant	

Claimed ☐ Adopted ☐ Euthanased ☐ Died ☐ Other ☐ On Date: _____

ADMISSION, ASSESSMENT AND HISTORY RECORD

CL22...



Garden Route

MBY 0065

KENNEL No. <u>K 13 438</u>		ADMISSION No. <u>MBY1996</u>				
Stray	☒ Surrender	☐ Abandoned	☐ Returned	☐ Impounded	☐ Confiscated	☐ Request for euthanasia
Date in <u>06/01/24</u>			Time in <u>14H59</u>	Date for release		

IDENTIFICATION & LOST AND FOUND			Lost & Found checked ☒ Yes ☐ No	Lost & Found Date checked <u>06/02/24</u>
Microchip/Collar or ID tag found ☒ Yes ☐ No	Date scanned or checked <u>06/02/24</u>	Microchip or ID Tag number <u>None</u>		

DESCRIPTION & HISTORY	Dog ☒	Cat	Other species (Specify) <u>B/I</u>		
	Breed <u>Rottie Cross</u>	Colour and Markings <u>Black & tan</u>			
	Condition	Sex <u>♀</u>	Age <u>2</u>		
	Temperament <u>friendly</u>	Sterilisation details <u>No</u>	Name <u>Shady</u>		
	Coat <u>Mal</u>	Tail <u>long</u>	Teeth Condition <u>Good</u>	Ears <u>Down</u>	Size <u>L</u>
	Area found / collected from <u>Exot 23</u>				Date <u>06/01/24</u>
	Reason for surrender				

ASSESSMENT		Surrendered by		Name <u>Melvin Muller</u>	
GOOD WITH:	Yes No	Found by			
Children		Residential Address	<u>121 Nicolaai Singel</u>		
Cats			<u>XT 23</u>		
Other Dogs		Postal Address	<u>No postal</u>		
Livestock/Other		Tel (H) <u>No num</u>	Tel (W) <u>No num</u>	Cell <u>0798399714</u>	
DO THEY:	Yes No	Email	<u>No email</u>		
Jump Fences		Donation R <u>None</u>	Cash	Card	EFT (Receipt No.) <u>None</u>
Run Away					
COMMENTS:					

PLEASE INSIST ON A RECEIPT

Confiscated: OB No: 1/17 Case No: 1/17 Inspector: Thamba

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.

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Signature <u>M. G. W. Thamba</u>	Witness for Society <u>H. S. Joseph</u>
FOR OFFICE USE: PENDING ADOPTION	
Details of first Applicant	Details of second Applicant
	Details of third Applicant

Claimed ☐ Adopted ☒ Euthanased ☐ Died ☐ Other ☐ On Date: 17/02/24

CONDITIONS / VOORWAARDES

- | | | | |
|------------------------------|--|-------------------------------|--|
| REQUEST FOR EUTHANASIA | | | |
| Owners authorising signature | | Witness for Society signature | |
| Reason for Euthanasia | | | |

Euthanase Bottle No: 11/11 Quantity used: _____

CLAIMANT

Residential Address: _____

Tel No (h): _____ Tel No (w): _____
Postal Address: _____

E-mail Address: _____ Cash/EFT/Card (Receipt No.) _____

E-mail Address: _____
 Reclaim Charge: _____ Added Donation: _____ Cash/EFT/Card (Receipt No.) _____
 Copy Attached: Yes ☐ No ☐

ID/Passport No: _____ Reg. No: _____

Vehicle Model _____ Colour _____
Witness for Society _____

Signature: _____

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

MEDICAL RECORD		
	Treatment	Cost

[illegible]

6/4/24

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 Wilna Joubert

HOME ADDRESS: 230 Dolphin Drive, Ashtonbay, Jeffreysbay

ID NO.: 6507020053 086

POSTAL ADDRESS: As above

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

CELL NO: 082 7744 998 FAX NO: _____

EMAIL: wilnajoubert99@gmail.com

Address where animal will be kept: As above

Occupation: Bookkeeper

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

Are you a student with consent to keep pets: _____ YES/NO

Reason for wanting animal: have my dogs they give me a happiness, especially the rehabilitation of mistreated animals. The bond between us is a wonderful experience. 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? Rottweiler

Can you afford private fees? Yes Who is your vet? Cape Cross Vet

How many animals live on the property? DOGS? 3 CATS? _____ OTHERS _____

What are the sexes of your animals? DOGS: Male 2 Female 1 DOGS: Male _____ Female _____

Are all your animals sterilised? Give details Yes

How many dogs and cats have you owned in the last 3 years? DOGS? 4 CATS? _____ OTHER? Ki

Which animals do you still have, and what happened to the others? 3 dogs, 1 died of old age.

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

Full description of the fencing and gate: Walls with palisade on top Height: 1.8m
Dogs sleep indoors at night. During the day the enclosed
encop is open for them with their pillows.

What shelter is provided: OUTDOORS _____ KENNEL _____ OTHER _____

Have you previously had pets from an SPCA? Yes Are there children under 10 in your household? _____

Pre Home Inspection Fee: One by Assisi 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 03/04/2024



ADOPTION CONTRACT



UITPLASINGSKONTRAK

Garden Route

DOB / CAT Breed Male Female

Microchip and or ID Tag No



992003000418796

This animal has been given to you in the firm and confident belief that it will 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 rehomed 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.

Garden Route

HOND / KAT Ras Manlik/Vroulik

Mikroskyfie en of ID nskyfie Nommer:

Hierdie diër is aan u oorhandig met die vertroue dat u die diër 'n goeie tuisle sal bied met verantwoordelike en liefdevolle sorg. Eienaarskap van 'n diër gee baie plezier en tevredenheid. Daar is ook verantwoordelikhede en verpligtinge wat nagekom moet word. Die feit dat hierdie diër 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 familieledes stem saam oor die aanneming en sal al die voorwaardes in die kontrak nakom.
- Indien ek om enige rede nie langer die diër 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 diër te hou nie sal ek nie besit van die diër 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 diër 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 klient skaal, in die terugbesorging van die diër.
- Ek sal die diër 'n redelike kans gee om aan sy nuwe tuisle gewoon te raak.
- Ek begryp dat donasies nie oordraagbaar is of terugbetaal word nie.
- Ek onderneem om die diër te versorg en te huisves na die Vereniging se tevredenheid.
- Ek sal nie die diër vasketting of gehok hou nie, en aanvaar dat indien die diër 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 diër 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 diër siek word (beserings uitgesluit), binne sewe (7) dae van aanneming, ek die diër 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 diër gesteriliseer word soos deur die Vereniging voorgeskryf.
- Ek onderneem om my diër te identifiseer ter alle tye met behulp van 'n mikroskyfie of halsband en naamplaatjie - slegs rekbands 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 diër 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 diër wel versorg word soos in die Uitplasingbeleid uiteengesit. Ek sal toelaat dat die Vereniging die diër in besit neem indien die voorwaardes en reëls van hierdie beleid nie redelik nagekom word nie.
- Ek sal nie die diër gebruik of toelaat dat die diër as 'n wag hond 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 diër 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 diër nie.

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

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

HOME ADDRESS
WOONADRES: 230 Dolphin Drive, Ashtonbay,

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

CELL No:
SELFOON Nr: 082 774 4998

E-MAIL: wilnajaubert99@gmail.com
E-POS:

ADOPTION FEE: R750
AANEMINGSVOOI:

cash / eft / card
kontant / eft / kaart

DONATION:
DONASIE:

KWITANSIE Nr 3333
RECEIPT No:

VEHICLE REG No. HTY 453EC
VOERTUIG REG Nr:

VEHICLE MAKE: Mitsu
VOERTUIG MAAK:

COLOUR: Blue
KLEUR:

SIGNATURE
HANDTEKENING: Joubert

WITNESS FOR SOCIETY:
GETUIE VIR VEREENIGING:

DATE / DATUM: 13/4/2024



ADMISSION NO

1427 1996

PRE AND POST HOME INSPECTION FORM DOMESTIC ANIMALS

PASSED: ☒ YES / ☐ NO

DATE UNDERTAKEN: 4/04/2024

TIME: 14:20

NAME OF APPLICANT: Wilma Joubert

ADDRESS: 230 Dolphin Drive, Ashlea Bay

HOME TEL No:

CELL No: 082 774 4998

ANIMAL(S) ADOPTING: Dog

SEX: Female

AGE: 2 year

PRE-HOME INSPECTION:

PROPERTY DESCRIPTION: Brick wall with spikes			
Type and height of fence: Brick wall 1.2-1.8m	Suitability of fence (i.e. small pets can't escape): ☒ OK		
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?	Rugby gate
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?	3 dogs

DESCRIPTION OF ANIMALS ON PROPERTY

	1	2	3	4	5
BREED	Rottie	Maltipoooodle	SR-X		
CONDITION	Good	Good	Good		
WELFARE (good?)	Good	Good	Good		
SEX & AGE	♂ / 1-3yrs	♂ / 1-3yrs	♀ / 1-3yrs	/	/
STERILISED	YES ☒ / NO ☐	YES ☒ / NO ☐	YES ☒ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐

OTHER INFORMATION / COMMENTS: The animals on the property looks good and their vaccines are in order. The property is big enough for an extra dog.

PROPERTY APPROVED FOR THE FOLLOWING ANIMALS:

☐ CATS

☐ SMALL DOGS

☐ MEDIUM DOGS

☒ LARGE DOGS

INSPECTED BY:

Luyanda Renge

SPCA:

Assisi

SIGNATURE:

[Signature]

POST HOME INSPECTIONS

DATE	RESULT	REMARK	BY WHOM

DIAGRAM OF PROPERTY ON REVERSE OF THIS PAGE

GEREGISTREERDE WOON- EN POSADRES

1. Bewaar die bewys van u GEREISTREERDE WOON- EN POSADRES in hierdie sakke.

2. Indien u van adres verander het, of indien besonderhede van u huidige adres, bv. straatnaam en of -nommer, ens. verander het, moet die vorm KENNISGEWING VAN ADRESVERANDERING, wat in die sakke agter in die identiteitsdokument is, gebruik word om die verandering aan te meld en moet dit ingedien word by of gepos word aan die naaste streek- distrikkantoor van die DEPARTEMENT VAN BINNELANDSE SAKE.

REGISTERED RESIDENTIAL AND POSTAL ADDRESS

1. Keep the proof of your REGISTERED RESIDENTIAL AND POSTAL ADDRESS in this pocket.

2. If you have changed your address, or, if particulars of your present address, e.g. name of street and or street number, etc., have been changed, the NOTICE OF CHANGE OF ADDRESS form in the pocket at the back of the identity document must be used to report the change and it must be handed in at or posted to the nearest regional district office of the DEPARTMENT OF HOME AFFAIRS.

1

I.D.No. 650702 0053 08 6



S.A. BURGER/S.A. CITIZEN

VAN/SURNAME

JOUBERT

VOORNAME/FORENAMES

WILNA

GEBOORTEDISTRIK OF-LAND/
DISTRICT OR COUNTRY OF BIRTH

SUID-AFRIKA

GEBOORTEDATUM/
DATE OF BIRTH

1965-07-02

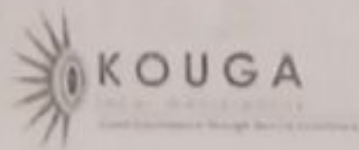
DATUM UITGEREIK
DATE ISSUED

2008-05-07

UITGEREIK OP GESAG VAN DIE
DIRKTEUR-GENERAAL:
BINNELANDSE SAKE

ISSUED BY AUTHORITY OF THE
DIRECTOR-GENERAL:
HOME AFFAIRS





MUNISIPALITEIT • KOUGA • MUNICIPALITY

Jeffreys Bay
Leerle
Thornhill
21
JEFFREYS BAY
6330
Tel: 042 200 2200

Humansdorp
26
HUMANSDORP
6300
Tel: 042 200 2200

St. Francis Bay
Cape St. Francis
Oyster Bay
137
ST. FRANCIS BAY
6312
Tel: 042 200 2200

Hankey
3
HANKEY
6350
Tel: 042 200 2200

Patensie
129
PATENSIE
6335
Tel: 042 200 2200

TAX INVOICE / BELASTING FAKTUUR

Bladsy 1 van 1

MNR/MEV JE&W JOUBERT POSBUS 1330 JEFFREYSBAY 6330						BELASTING FAKTUUR	
						2016443361	
						KOUGA VAT REG.	
						4070193497	
						DEBITEUR BTW NOMMER	
						TOTAAL BTW	
						648.85	
REKENING NOMMER	REKENING DATUM	KWITANSIES GEPOS TOT DATUM	DATUM BETAALBAAR	JAARLIKSE VERVALDATUM	DEPOSITO	BOUKLOUSULE	OPPERVLAKTE
4000346128	21/03/2024	19/03/2024	15/04/2024		1380.00-		
EIENDOMS INLIGTING							
WOONBUURT	ERF	GROND WAARDASIE	GEBOU WAARDASIE	DORPSGEBIED	STRAAT ADRES	GEDEELTE	SONERING
JBAY ASTON BAY	346		1310000		DOLPHINRYLAAN 230		SRESB 1A

METER LESINGS							
DIENS	METER NR	VORIGE LESING	NUWE LESING	FAKTOR	VERBRUIK	PERIODE	DAAGLIKSE GEMIDDELDE
W	BKLU513	4880	4891		11.000	10/01-13/02	32
E	0000837278	2211	3300		1089.000	10/01-13/02	32.02

DIENS TIPE	VERBRUIK	HEFFING	BTW	BEDRAG
Kwitansies: 2151127863				306.91-
Oordragte				306.91
** Totale ongespes saldos				.00
Saldo oorgedra				6693.09
Joernale: 3099-6 3099-7			38.89	290.20
Kwitansies: 2151127863				6693.09-
Oordragte: 3099-6				306.91-
Water Basies	149.38000		22.41	171.79
Water Dae @ Huidige	34			
Water Verbr@Huidige	11		23.18	177.73
Elektreite Basies	328.29000		49.24	377.53
Elektreite Dae @ Huidige	34			
Elektreite Verbr@Huidige	1089		431.97	3311.75
Riool Vaste Koste	1	274.65000	41.20	315.85
Riool Verbr. Koste	700	17.47000	1.83	14.09
Vullis Verwydering	1	222.08000	33.31	255.39
GBF Heffing	1	45.46000	6.82	52.28
** Totale maandelikse saldo:				4667.66

MAANDELIKS		JAARLIKS		REËLINGS BALANS	VERSKULDIG
AGTERSTALLIGE	HUDIGE	AGTERSTALLIGE	HUDIGE		
0.00	4667.66	0.00	0.00	0.00	4667.66

KOUGA IS TOT DROOGTERAMPGEBIED VERKLAAR. VERMINDER WATERVERBRUIK ONMIDDELIK.
REKENING BETAALBAAR VOOR OF OP 15 APRIL 2024.

	VERWYSING	TAKKODE	REKENING NOMMER
	4000346128XXXXXXXXXX	250 655	52540033504

See Account / Sien Rekening

Please note that a search fee will be levied on accounts where incorrect deposit reference has been used.

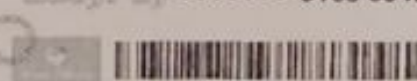
Neem asseblief kennis dat 'n opsoekfoel gehel sal word waar betalings met verkeerde verwysingsnrs gebruik is.

11369 0040 0034 6128

9163 0040 0034 6128 4

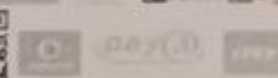
ACKERMANS SHOPRITE Checkers

masterpass



0253 4000346128

SCAN
TO PAY



10 April 2024

Wilna Joubert
230 Dolphin Drive
Aston bay
6330

Dear Wilna

KEEPING OF AN ADDITIONAL DOG

Your request to adopt a 4th dog bears reference.

The permission is hereby granted to keep a 4th dog on your property withstanding that the following be adhered to: -

1. That the dogs do not create nuisance to the public and neighbours.
2. That the dogs be well looked after, in accordance with the guidelines of the SPCA.
3. As result of any non-adherence of the above mentioned the subsequent removal of the dogs to the SPCA will be implemented.

Hope you find the above in order.



Mr. R. Nel
ACT. MANAGER: SAFETY & SECURITY

[illegible]

This certificate also serves as a movement permit for this animal within the Republic of South Africa on condition that:

1. It accompanies the animal;
2. Property of origin is free from quarantine restrictions imposed for rabies control purposes;
3. The rabies vaccine immunity is valid;
4. The certificate was signed in the space below to confirm that the condition in 2 and 3 were met before the intended movement.

BY VETERINARIAN

SIGNATURE _____

PRACTICE STAMP

VETERINARIAN'S SIGNATURE _____

DATE _____

04/03/2024

DOCTOR'S NAME _____

DR MULLER

P.O. Box 258

George, 6530

Ph (044) 693 - 0824

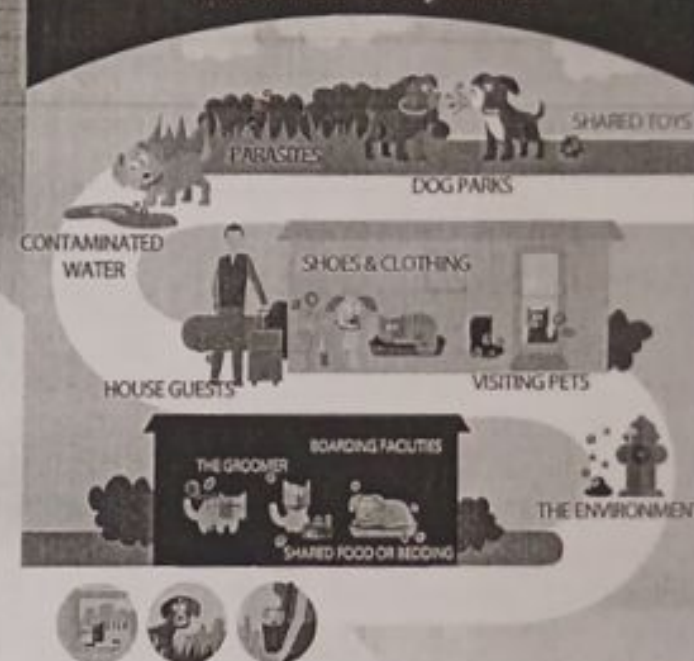
PRACTICE STAMP



Animal Health

Intervet South Africa (Pty) Ltd, Reg. No. 1991/006580/07
29 Spartan Road, Spartan, 1619, RSA | Private Bag X2926, Isando, 1600, RSA
Tel: +2711 923 9300, Fax: +2711 392 3158, Sales Fax: 086 663 1777

Vaccination protects your pet against
DANGEROUS GERMS
that can be everywhere.



PETS NAME _____

BELLA

MY VET

GARDEN ROUTE SPCA
MOSSEL BAY

18 BILL JEFFERY AVE
KWANONQABA

044 693 0824

072 287 1761

theatrem@grsoca.co.za

Consulting Hours

Monday & Wednesday: CLOSED

Tuesday & Thursday: 9:00 to 11:00 and 15:00 to 16:00

Friday – 12:00 to 16:00

Saturday, Sunday & Public Holidays: Closed

MICROCHIPPED ANIMAL REGISTRATION FORM

* COMPULSORY FIELDS

* PRINT INFORMATION

MICROCHIP NUMBER



992003000418796

VET OR WELFARE ORGANISATION

Vet Practice Number *

Vet Practice Name *

Vet Practice Phone - Daytime *

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

PET OWNER INFORMATION

Cell No. * 0827744998

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

E-mail * wilnajokubert99@gmail.com

If possible, please provide a personal email, not a company email.

Title * MR S Initials * W

Surname * JOUBERT

Street 230 DOLPHIN DRIVE

City

Suburb AGHTON BAY

Area Code JEFFREYS BAY

Country

Province EASTERN CAPE

Phone - Day time

Phone - Night time

OTHER CONTACTS

Title * Initials *

Surname *

Cell No. *

Title * Initials *

Surname *

Cell No. *

Title * Initials *

Surname *

Cell No. *

CHIP DETAILS

Registration Date *

Date of Implant * 12 - 04 - 2024

Was the Microchip implanted by this veterinary practice? Yes No

Name of Vet who implanted the Chip

Ngqubo Ngqulile

PET DETAILS

Pet Name BELLA

Date of birth 2022

Species * ROTTWEILER-CANINE

Breed * ROTTWEILER

Colour BLACK + BROWN

Markings

Gender Male ☒ Female

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 and agrees that his / her personal information may be used by Virbac to forward him / her a Newsletter as well as to send him / her 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 his personal information being used by Virbac RSA (Ltd) Pty for the above-mentioned purposes. SIGNATURE * *W. Joubert*

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 011 852 6364.
3. By e-mail Scan and E-mail the completed form to backhome@virbac.co.za or backhome.support.external@virbac.co.za
4. By App Download the Virbac Backhome Africa App