

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 Done 28/05/24 DR. MULLER



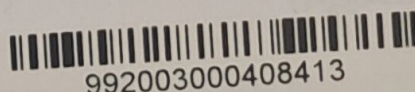
Copy of Vaccination Record/ Certificate



Microchip



Microchip Registration- chip number



992003000408413

Completed by: Kay levers

Date: 30/05/2024

Manager: [Signature]

Date: 30/05/2024

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.

ADMISSION NO:

MBY 2426

CONTRACT NO:

MBY 0098

Adoptee INFO:

Name & Surname Andre Prinsloo

Contact INFO: 071 352 9864

ADMISSION, ASSESSMENT AND HISTORY RECORD



Garden Route

LOADED

KENNEL No. K24 K29 K37				ADMISSION No. MBY2426		
☒ Stray	☐ Surrender	☐ Abandoned	☐ Returned	☐ Impounded	☐ Confiscated	☐ Request for euthanasia
Date in	14/03/24		Time in	09:00	Date for release	

IDENTIFICATION & LOST AND FOUND			Lost & Found checked	☒ Yes ☐ No	Lost & Found Date checked	14/03/24
Microchip/Collar or ID tag found	☒ Yes ☐ No	Date scanned or checked	14/03/24	Microchip or ID Tag number		

SCRIPTION & HISTORY	☒ Dog	Cat	Other species (Specify)			
	Breed	Collie x Lab.		Colour and Markings	Black - Brown + tinge	
	Condition	Skinny + dirty		Sex	♂	Age 2 1/2 months
	Temperament	Good		Sterilisation details	NO	Name
	Coat Thin	Tail long	Teeth Condition Good	Ears Down	Size Small	
	Area found / collected from In front of Fire Station					Date 14/03/24
	Reason for surrender Stray picked up					

ASSESSMENT		Surrendered by		Name		Gerakline van Grooten	
GOOD WITH:		Found by		Name		Gerakline van Grooten	
Children	☐	Residential Address		9 P. Odendaal Street			
Cats	☐			Dorchester 6510			
Other Dogs	☐	Postal Address		N/A			
Livestock/Other	☐	Tel (H)		Tel (W)		Cell 0837735639	
DO THEY:	☐	Email		gerakline.vg@gmail.com			
Jump Fences	☐	Donation R		Cash	Card	EFT	(Receipt No.) N/A
Run Away	☐	N/A					
COMMENTS:							

PLEASE INSIST ON A RECEIPT

Confiscated: OB No: N/A Case No: N/A Inspector: N/A

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

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.

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.

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.

3. Enige koste hierop onderskryf is verskuldig en betaalbaar op aanvraag.

4. Die Vereniging sal geen dier plaas wat ongesterriliseer is nie.

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
	No	

Date _____

MEDICAL RECORD

Date	Remarks	Treatment	Cost
15/3/2024	Trimm + rabies		
	NXT - 15/4/24		
15/4/2024	Trimm + rabies		
	NXT - 15/5/24		
20/5/2024	Trimm and		
	NXT - May 2025		
28/5/24	Cas fake Inj.		
	Dep 6 + Pctcam		

5139

(1) (2)



ADMISSION NO

PRE AND POST HOME INSPECTION FORM DOMESTIC ANIMALS

PASSED: ☒ YES ☐ NO

DATE UNDERTAKEN:

25/5/24

TIME:

12:45

NAME OF APPLICANT: André Prinsloo

ADDRESS: Plaas Duinzicht - Oorkant Perse SA
Duinzicht Avenue

HOME TEL No:

CELL No:

0713529864

ANIMAL(S) ADOPTING: 2x Dogs 1x Lab 1x Collie

SEX: 1 Male 1 Female

AGE:

5 months

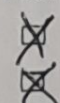
PRE- HOME INSPECTION:

PROPERTY DESCRIPTION			
Type and height of fence:	Bob wire fence		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?	farm animals

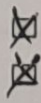
DESCRIPTION OF ANIMALS ON PROPERTY					
	1	2	3	4	5
BREED					
CONDITION					
WELFARE (good?)					
SEX & AGE	/	/	/	/	/
STERILISED	YES ☐ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐

OTHER INFORMATION / COMMENTS Farm big enough dogs good to go to loveable owners. lots of play ground and grass

PROPERTY APPROVED FOR THE FOLLOWING ANIMALS:



CATS



SMALL DOGS



MEDIUM DOGS



LARGE DOGS

INSPECTED BY:

Wally Wagenaar

SPCA:

Mbay SPCA

SIGNATURE:

POST HOME INSPECTIONS

DATE	RESULT	REMARK	BY WHOM

DIAGRAM OF PROPERTY ON REVERSE OF THIS PAGE

MY OWNER

NAME **Andre Prinsloo**

POSTAL ADDRESS

STREET ADDRESS **Plaas Duinzicht**
Mosselbay

HOME PHONE

WORK PHONE

CELLPHONE **071 352 9864**

BREEDER DETAILS

ME

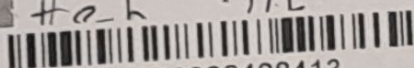
SPECIES **Canine**

BREED **Collie * Lab**

COLOUR **Black chocolate**

SEX **Male**

DATE OF BIRTH **Feb 71**

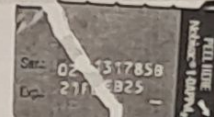
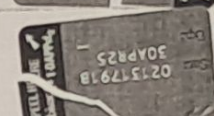
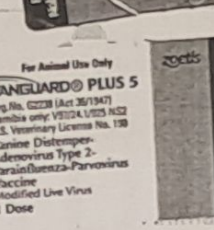
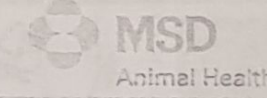
MICROCHIP/TA 
992003000408413

FEATURES/MARKS

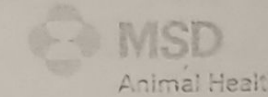
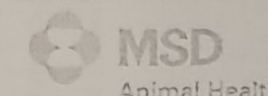
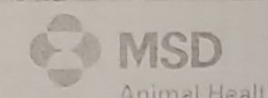
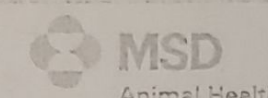
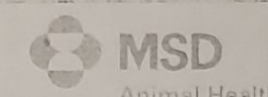
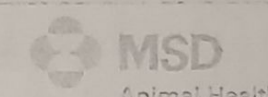
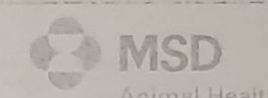
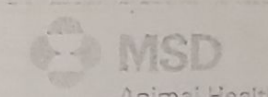
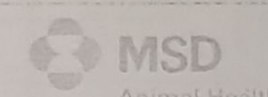
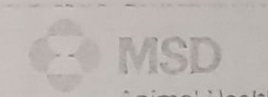
NEXT VACCINATION DUE

DATE	DATE	DATE
20/5/25		

I WAS VACCINATED ON

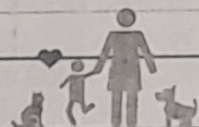
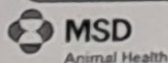
DATE	VACCINE AND BATCH NO.	VET SIGNATURE
15/3/26		AWA
15/4/26		AWA
20/5/26		AWA
		
		
		
		
		
		
		

I WAS VACCINATED ON

DATE	VACCINE AND BATCH NO.	VET SIGNATURE
		
		
		
		
		
		
		
		
		
		
		

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.



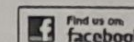
Quantel

Exitel Plus

Exitel Plus XL



Bravecto



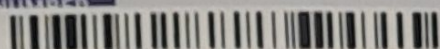
facebook.com/Bravecto.South

MICROCHIPPED ANIMAL REGISTRATION FORM

* COMPULSORY FIELDS

* PRINT INFORMATION

MICROCHIP NUMBER



992003000408413

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

VET OR WELFARE ORGANISATION

Vet Practice Number * FR14 / 13019.

Vet Practice Name * SPCA VET ROOM MOSSELBAY

Vet Practice Phone - Daytime * 044 6936824

PET OWNER INFORMATION

Cell No. * 071 352 9864

E-mail * andreprinsloo@gmail.com

Title * MR Initials * A

Street * PL AAS DUINEZICHT

Suburb

Country

Phone - Day time

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

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

Surname * PRINS LOO

City

Area Code * MOSSELBAY

Province

Phone - Night time

OTHER CONTACTS

Title * Initials * Surname *

Cell No. * Surname *

Title * Initials * Surname *

Cell No. * Surname *

Title * Initials * Surname *

Cell No. * Surname *

CHIP DETAILS

Registration Date *

Date of Implant * 30 - 05 - 2024

Was the Microchip implanted by this veterinary practice? ☐ Yes ☒ No

Name of Vet who implanted the Chip * NDYEBONGRILE

PET DETAILS

Pet Name

Species * DOG

Colour * BLACK

Gender ☒ Male ☐ Female

Date of birth * 2024

Breed * LABRADOR X

Markings

Sterilised ☒ Yes ☐ No

MEDICAL

Medical Conditions

Medical Insurance Company

Medical Insurance Policy Number

Medical Insurance Phone

KENNEL UNION OF SOUTH AFRICA (KUSA)

Are you a KUSA Registered Member? ☐ Yes ☒ No

KUSA Registration Number

Pet Registered Name

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 it's 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
2. By fax
3. By e-mail
4. By App

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

Fax this completed form to BackHome on 0800 222 546 (TOLL FREE) or 011 852 6364

Scan and E-mail the completed form to backhome@virbac.co.za or backhome.support.external@virbac.co.za

Download the Virbac Backhome Africa App

www.backhome.co.za • Tel: 011 852-8120 or or 011 027 8837 • Fax: 0800 222 546



ADOPTION CONTRACT

Garden Route

DOG / CAT	Breed	Male / Female
Microchip and or ID		
992003000408413		

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 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: Plaas Duinezicht, Mosselbay

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

CELL No:
SELFOON Nr: 0713529864

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

ADOPTION FEE:
AANEMINGSVOOL: R750

VEHICLE REG No.
VOERTUIG REG Nr: CBS 42320

SIGNATURE
HANDTEKENING: [Signature]

DATE / DATUM: 30/05/24



Garden Route

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

Hierdie dier is aan u oorhandig met die vertroue dat u die dier 'n goeie tuisle sal bied met verantwoordelike en liefdevolle sorg. Eienaarskap 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 familielede 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 klient skaal, in die terugbesorging van die dier.
- Ek sal die dier '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 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 vasgekettering 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 rekbandle 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 verwaarloosing 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.

Andie Prinsloo

ID/PASSPORT No.:
ID/PASPOORT Nr.: 6809275275087

(B):
(W):

FAX No:
FAKS Nr:

DONATION:
DONASIE: 3447

VEHICLE MAKE:
VOERTUIG MAAK: NISSAN

COLOUR:
KLEUR: WIT

WITNESS FOR SOCIETY:
GETUIE VIR VERENIGING: [Signature]

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): A. Prinsloo

HOME ADDRESS: Plaas Duinzicht- Mosselbay

ID NO.: 6809275075087

POSTAL ADDRESS: Suite 24 Post net

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

CELL NO: 071 3529 864 FAX NO: _____

EMAIL: andieprinsloo8@gmail.com

Address where animal will be kept: Duinzicht

Occupation: Farmer

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 animal: Companion

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? Lab / collie

Can you afford private fees? yes Who is your vet? _____

How many animals live on the property? DOGS? 2 CATS? 4 OTHERS cattle

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

Are all your animals sterilised? Give details NO - cattle

How many dogs and cats have you owned in the last 3 years? DOGS? 0 CATS? 0 OTHER? _____

Which animals do you still have, and what happened to the others? N/A

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

Full description of the fencing and gate: Game fence Height: _____

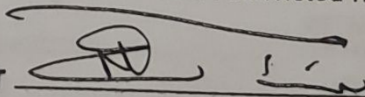
What shelter is provided: OUTDOORS Indoors KENNEL _____ OTHER _____

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

Pre Home Inspection Fee: _____ Receipt No: 3423

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



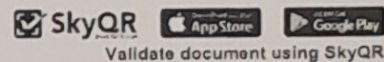
Date of application 23/05/24

One of the Global One money management products or services

Proof of Account Details



CAPITEC



To Whom it May Concern,

We hereby confirm that Izelle Prinsloo has the following account(s) at Capitec Bank Limited on 30/05/2024

Client Details

Name:	Izelle Prinsloo
ID/Passport Number:	7302170053089
Residential Address	FARM 301, DUINZICHT, MOSSEL BAY, MOSSEL BAY, 6506
Postal Address	233A MATOLA DRIVE, MOSSEL BAY GOLF ESTATE, MOSSEL BAY, MOSSEL BAY, 6506

Account Details

Account Status:	Active
Account Type:	Savings
Account Number:	1278564096
Branch Code:	470010
Date Opened:	29/08/2011

The account details provided herein should not be read as extending by implication to any other matters not specifically addressed. The account details are given as at the above date and no obligation is hereby assumed to update the account details on any future date.

Capitec Bank Limited shall have no liability whether in contract, delict (including without limitation negligence) or otherwise to the above accountholder or any third party in relation to the account details contained herein.

24hr Client Care Centre 0860 10 20 43 E ClientCare@capitecbank.co.za capitecbank.co.za

Capitec Bank is an authorised financial services (FSP46669) and registered credit provider (NCRCP13). Capitec Bank Limited Reg. No.: 1980/003695/06

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Unique Document No.: 3a6bb2c5-3cf8-4a87-ba40-1acb51d69cf6 / 406 / V4.0 - 14/04/2018 (ddmmccyy)