

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 09/07/2024
- ☒ Copy of Vaccination Record/ Certificate
- ☒ Microchip
- ☒ Microchip Registration- chip number 992003000356238

ADMISSION NO:

MBY 2731/24

CONTRACT NO:

MBY 0135

GREY LIN

Adoptee INFO:

Name & Surname Billy Robertson

Contact INFO: 082 820 4489

Completed by: [Signature]

Date: 10/07/2024

Manager: [Signature]

Date: 10/07/2024

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.

ADMISSION, ASSESSMENT AND HISTORY RECORD

LOOPER



Garden Route

KENNEL No. <u>26. 29</u>				ADMISSION No. <u>MBY2731/24</u>		
Stray	Surrender	Abandoned	Returned	Impounded	Confiscated	Request for euthanasia
Date in <u>24/05/24</u>		Time in		Date for release		

IDENTIFICATION & LOST AND FOUND			Lost & Found checked ☒ Yes ☐ No	Lost & Found Date checked <u>24/05/24</u>
Microchip/Collar or ID tag found	☒ Yes ☐ No	Date scanned or checked <u>24/05/24</u>	Microchip or ID Tag number	<u>None</u>

DESCRIPTION & HISTORY	☒ Dog	☐ Cat	Other species (Specify) <u>B/I</u>		
	Breed	<u>Weimeraner X</u>		Colour and Markings	<u>Grey</u>
	Condition	<u>Fair</u>		Sex	<u>♂</u>
	Temperament	<u>Friendly</u>		Sterilisation details	<u>No</u>
	Coat <u>S</u>	Tail <u>L</u>	Teeth Condition	Ears <u>hang</u>	Size <u>L</u>
	Area found / collected from <u>Danabay</u>				Date <u>24/05/24</u>
	Reason for surrender <u>Keybears complaining</u>				

ASSESSMENT		Surrendered by ☒ Name <u>Guetly Streckeisen</u>	
GOOD WITH: Yes No		Found by	
Children	☐ Yes ☐ No	Residential Address <u>51 Malva Rd, Danabay</u>	
Cats	☐ Yes ☐ No	Postal Address <u>No postal</u>	
Other Dogs	☐ Yes ☐ No	Tel (H) <u>No num</u> Tel (W) Cell <u>0783436142</u>	
Livestock/Other	☐ Yes ☐ No	Email <u>No email</u>	
DO THEY: Yes No	Donation R <u>None</u> Cash Card EFT (Receipt No.) <u>None</u>		
Jump Fences	COMMENTS:		
Run Away	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 / DO NOT own the animal/s described above, that IT IS / IT IS NOT a stray and I DO / 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. 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 first Applicant	Details of second Applicant
Details of third Applicant	

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

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.
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. 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.
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. Any charges endorsed hereon are due and payable on request.
3. Enige koste hierop onderskryf is verskuldig en betaalbaar op aanvraag.
4. The Society will not home any animal unsterilised.
4. Die Vereniging sal geen dier plaas wat ongesteiriliseer is nie.

REQUEST FOR EUTHANASIA

Owners authorising signature	Witness for Society signature
Reason for Euthanasia	

Euthanasia 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
	No



992003000356238

MEDICAL RECORD

Date	Remarks	Treatment	Cost
09/07/2024	Newer by DSM		

PTS APPROVAL

NAME	SIGN

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/D^r/Mr/Ms (including initials):

Billy Robertson 0828204489

HOME ADDRESS:

Sittingbourne farm, Transand Entrance

ID NO.: 5909305015080

POSTAL ADDRESS:

Postbus 32, Hartenbos 6520

TEL NO (H):

(B):

CELL NO:

082 820 4489 FAX NO:

EMAIL:

billy@transand.net

Address where animal will be kept:

Sittingbourne farm, Hartenbos

Occupation:

Farmer

Do you own or rent your property:

Own

Do you have consent from owner / Body Corporate?

yes

Are you a student with consent to keep pets:

YES/NO

Reason for wanting animal:

Companion, big animal lover

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?

Dr Stander, Mbay Animal Hospital

How many animals live on the property?

DOGS?

5

CATS?

X

OTHERS

farm animal

What are the sexes of your animals?

DOGS: Male

2

Female

3

DOGS: Male

Female

Are all your animals sterilised? Give details

3 girls: Sterilised, 1 Male: sterilised

How many dogs and cats have you owned in the last 3 years?

DOGS?

5

CATS?

X

OTHER?

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

All five is happy and healthy.

Is your property fenced and has a proper gate?

Yes

Will you chain/ an animal?

No

Full description of the fencing and gate:

Farm fencing

Height:

What shelter is provided: OUTDOORS

✓ + Roof

KENNEL

OTHER

Have you previously had pets from an SPCA?

Yes

Are there children under 10 in your household?

-

Pre Home Inspection Fee:

R100

Receipt No:

3531

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:

B Robertson

Date of application

5/07/2024

ADMISSION No.
TOELATINGSNR.

MBY0135



ADOPTION CONTRACT

Garden Route

DOG / CAT	Breed	Male / Female
Microchip and or ID		

992003000356238

This animal has been given to you to 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: Sittingbourne Place

TEL No (H):
TELEFOON Nr (H): 044 6950105

CELL No:
SELFOON Nr: 0828204489

E-MAIL:
E-POS: billy@transand.net

ADOPTION FEE:
AANEMINGSVOOI: R750

VEHICLE REG No.
VOERTUIG REG Nr: CBS3803

SIGNATURE
HANDTEKENING: B Robertson

DATE / DATUM: 11/07/24



Garden Route

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

UITPLASINGSKONTRAK

Hierdie dier is aan u oorhandig met die vertroue dat u die dier 'n goeie tuiste 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 familieliede 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 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 vasketting 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.

Billy Robertson

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

(B):
(W): 11

FAX No:
FAKS Nr:

DONATION:
DONASIE: 3545

KWITANSIE Nr
RECEIPT No. 3545

VEHICLE MAKE:
VOERTUIG MAAK: Isuzu

COLOUR:
KLEUR: wit

WITNESS FOR SOCIETY:
GETUIE VIR VERENIGING



ADOPTION No

ADMISSION

PRE AND POST HOME INSPECTION FORM

PASSED: ☒ YES / NO

DATE UNDERTAKEN: 8. 7. 2014 TIME: 13:45

NAME OF APPLICANT: Billy Robertson

ADDRESS: Sittingbourne Farm (Transand entrance) Gudsheorn road.

HOME TEL No: CELL No:

ANIMAL(S) ADOPTING: Dog x 2, 1 Weimeraner, 1 Rottweiler

SEX: Male + Female AGE: ± 2 yrs + 7 months

PRE- HOME INSPECTION:

PROPERTY DESCRIPTION			
Type of fence: fence wire	Height of fence: 2m		
Any sign of Kennel/Shelter?	YES ☒ / NO ☐	Any sign of Chain/Runner?	YES ☐ / NO ☐
Is the front yard separated from the back?	YES ☒ / NO ☐	If yes, what partitioning?	fence mesh wire
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?	5

DESCRIPTION OF ANIMALS ON PROPERTY					
	1	2	3	4	5
BREED	Collie P	Australian Cattle	Scottish Fold	Jack russell	Scottish Fold
SEX	♂	♀	♀	♀	♀
AGE	6 years	4 years	2 years	2 years	2 years
STERILIZED	YES ☐ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐

OTHER INFORMATION / COMMENTS
Gate space is a fair bit enough but.

PROPERTY APPROVED FOR THE FOLLOWING ANIMALS:

- ☐ SMALL DOGS
☒ MEDIUM DOGS
☐ LARGE DOGS

- ☐ CATS
☐ EQUINE
☐ OTHER (specify)

INSPECTED BY: Huwona, Brygi

SPCA: Mossé/boy

SIGNATURE: [Signature]

POST HOME INSPECTIONS

DATE	RESULT	REMARK	BY WHOM

DIAGRAM OF PROPERTY ON REVERSE OF THIS PAGE

DRIVING LICENCE
BESTUURSLISENSIE
CARTÃO DE CONDUÇÃO

8400 SOUTH AFRICA
ZA

J. ROBERTSON

ID No: 02/S909805015080 MALE

Birth/Geboorte: 30/09/1959 ZA Restr./Beperk:

Lic. No./Lisensienr.: 60190001FH3X No. 1

Valid/Geldig: 18/08/2023 - 17/08/2028

Issued/Uitgereik: ZA

Code/Kode: A 0 EC 0

Veh. Restr./Voertuigbeperkings: 03/01/2019 31/08/1999

First Issue/Eerste uitreiking:

J. Robertson



MICROCHIPPED ANIMAL REGISTRATION FORM

* COMPULSORY FIELDS

* PRINT INFORMATION

MICROCHIP NUMBER



992003000356238

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. * 0828204489 Only mobile numbers in South Africa, Botswana and Namibia will be receiving SMS notifications.

E-mail * billy@transand.net If possible, please provide a personal email, not a company email.

Title * MR Initials * B Surname * ROBERTSON

Street SITTINGBOURNE FARM

City

Suburb Area Code MOSSELBAY

Country Province

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 * 11 - 07 - 2024

Date of Implant * 10 - 07 - 2024

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

Name of Vet who implanted the Chip MARY ANN CHORONUM

PET DETAILS

Pet Name GREYLIN

Date of birth 2022 M M D D

Species * DOG

Breed * WEIMERANER

Colour GREY

Markings

Gender ☒ Male ☐ Female

Sterilised ☒ Yes ☐ No

KENNEL UNION OF SOUTH AFRICA (KUSA)

MEDICAL

Are you a KUSA Registered Member? ☐ Yes ☐ No

Medical Conditions

KUSA Registration Number

Medical Insurance Company

Pet Registered Name

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 he / 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 *B Robertson*

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

Eskom

LDINGS SOC LTD REG NO 2002/015527/30
0 4740101505

INGBOURNE BOERDERY BK

TSON JW

X 32

WBOS

TAX INVOICE

TRANSACTION SUMMARY

CHARGE
CAPACITY CHARGE
CHARGE (CKVH) (ALL)
E (ALL)
STD)
OFF)
PEAK)

4,478.00
4,044.00
1,499.00
8,133.00

CHARGES FOR BILLING PERIOD

AMARY FOR JULY 2024

FORWARD

(Due Date 2024-06-20)
ACR Payment 2024-06-20

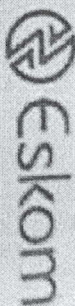
WESTERN REGION
PO BOX 377 BELVILLE 7535

CONTACT CENTRE: (0860) 037566

FAX NO: 0862 437 566

E-MAIL: customerservice@eskom.co.za

WEB: www.eskom.co.za



TEL: 08600 37566

SMS:

CUSTOMER SELF SERVICE WEBSITE

<http://esonline.eskom.co.za>

WESTERN REGION
PO BOX 377 BELVILLE 7535

YOUR ACCOUNT NO	5447772305
SECURITY/HELD	70400.00
BILLING DATE	2024-07-06
TAX INVOICE NO	544854778811
ACCOUNT MONTH	JUL Y 2024
CURRENT DUE DATE	2024-07-22
VAT REG NO	4720140302

E-MAIL: billy@transand.net

DIRECT DEPOSIT DETAIL
BANK: ABSA
BRANCH CODE: 334110
BANK ACC NO: 340167430

ACCOUNT NO / REFERENCE NO

5447772305

NAME

SITTINGBOURNE BOERDERY BK

FAX NUMBER

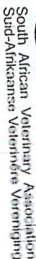
0934 5447772305

84,226.76
84,226.75
44,139.27

inkPad

10.29

23



Mission

Tel:+27(12)3461150, www.savh.co.za, volhoo@savh.co.za

A project of the SAVA which aims to provide primary healthcare to pets owned by owners who cannot afford the services of a veterinarian. Various clinics have been established countrywide. Veterinarians donate their time and skill. Financial support is required, primarily to purchase medication and materials. Registered non-profit company (1998/016654/08) non profit organisation (000 234NP0) and public benefit organisation (1300011321)

Tel: +27(12)3461150, www.communityvet.co.za, cvc@java.co.za

The foundation was established to promote a greater understanding of animals, through promoting research and an informed public. Student bursaries and research grants are awarded; research results are published in national and international journals.

www.savi.org.za, savi@sava.co.za

SOUTH AFRICAN VETERINARY ASSOCIATION
The SAVC is the regulatory body for the veterinary profession and veterinary para-professions in South Africa.
T: +27 12 371 2334/566 347, www.savc.org.za, savc@savc.org.za

Tel: +27(12)3456347, www.save.org.za

Import and export requirements
www.daff.gov.za → Branches → Agricultural Production, Health and Food Safety
 → AnimalHealth → Import/Export Policy Unit → (application forms can be found here)

We care for your pet

Pet's name

Troeteldier se naam

Dr. H.J. Basson

Dr. J. Basson

Floraweg 223

Danabai

6510

044 698 1815

Sprekure:

Maandag tot Vrydag : 08h00 - 18h00
09h00 - 11h00

Saterdag : 08h00 - 11h00

Sondag en Publieke Vakansies : Net noodgevalle

Noodnummer: 082 820 4810

Ons gee om vir jou troeteldier



South African Veterinary Association
Suid-Afrikaanse Veterinêre Vereniging

[illegible]

Hiermee word gesertifiseer dat die dier wat op bladsy 1 van hierdie dokument geïdentifiseer is, gesteriliseer is

09/07/2026

AS 11/16

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- Sterilisatie van u troeteldier word gewoonlijk op ses maande ouderdom gedoen. Vroeër sterilisatie is moonlik, bespreek dit met u veearts.

- Sterilisasie is voordelig vir beide troeteldier en eienaar.
- o In tewe word baarmoederinfeksies (piometra) en melkklier-gewasse (indien gesteriliseer voor die tweede hitte) verminder. Hitte kom nie weer voor nie.
- o In reuns is prostaatvergroting en -infeksies minder waarskynlik in gesteriliseerde honde.
- o Gedragskenmerke soos rondloop, territoriale uimering en bakleiery sal verminder.
- Sterilisasie het geen nadelige effekte op u troeteldier se gesondheid nie. Die instink om te beskerm word nie beïnvloed nie.
- U troeteldier mag geneig wees om gewig op te tel na sterilisasie. Dit kan beheer word met dieet en oefening.
- Deur u troeteldier te steriliseer help u om die groot getal rondloperdiere te verminder.
- U veearts sal meer inligting oor sterilisasie kan verskaf.

Datum	Naam/Lotnummer en valdatum van ent-tof	Handtekening van veearts
13/6/23	Canigen® DHPPi Virbac 8LPX NOV 23	BVS
27/7/23	Canigen® DHPPi Virbac 8LPY JAN 23	BVS
17/8/23	Canigen® DHPPi Virbac 8LPY JAN 23	BVS
15/5/24	Canigen® DHPPi Virbac 9216 SEP 24	BVS
28/5/24	Canigen® DHPPi Virbac 9216 SEP 24	N-M CPCA

Amptelijke praktijkstempel/adres	Volgende inentingsdatum
Danabaai Vet. Kliniek 223 Flora Weg Danabaai 6510 Tel: 044 698 1815	4/7/22.
Danabaai Vet. Kliniek 223 Flora Weg Danabaai 6510 Tel: 044 698 1815	17/8/22.
Danabaai Vet. Kliniek 223 Flora Weg Danabaai 6510 Tel: 044 698 1815	17/8/23
Danabaai Vet. Kliniek 223 Flora Weg Danabaai 6510 Tel: 044 698 1815	15/5/24
	28/5/24

HONDSCHOLHEID INENTINGSSERTIFIKAAT

[illegible]

ONTWURMSKEDULE

- Gereelde ontworming is noodsaaklik om u troeteldier gesond te hou. Hierdie is veral belangrik in onvolwasse diere. Migrerende wurmlarwes is ook 'n gesondheidsrisiko vir mense.
- Die doeltreffendheid van die ontwormingmedikasies teen verskillende wurmsoorte wissel, asook die tydsduur tussen behandelings. Raadpleeg u veearts vir die optimale kursus.

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