

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 13/06/24 @ Mbayi SPCA
- ☒ Copy of Vaccination Record/ Certificate
- ☒ Microchip
- ☒ Microchip Registration- chip number _____

ADMISSION NO:

MBY 2743

CONTRACT NO:

MBY 0107

Adoptee INFO:

Name & Surname L. Pelsier

Contact INFO: 084 058 1865



992003000356208

Completed by: [Signature] Kay leers

Date: 14/06/2024

Manager: [Signature]

Date: 14/06/2024

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, ASSESSMENT AND HISTORY RECORD

LOADED



Garden Route

KENNEL No. <u>CB 03</u>				ADMISSION No. <u>MBY2743</u>		
Stray	<u>Surrender</u>	Abandoned	Returned	Impounded	Confiscated	Request for euthanasia
Date in	<u>28/05/24</u>		Time in	<u>4:00</u>	Date for release	

IDENTIFICATION & LOST AND FOUND			Lost & Found checked	☒ Yes ☐ No	Lost & Found Date checked	<u>28/05/24</u>
Microchip/Collar or ID tag found	☒ Yes ☐ No	Date scanned or checked	<u>28/05/24</u>	Microchip or ID Tag number		

DESCRIPTION & HISTORY	Dog	<u>Cat</u>	Other species (Specify)			
	Breed	<u>DSH</u>	Colour and Markings <u>Ginger</u>			
	Condition	<u>Fair</u>	Sex	<u>Male</u>	Age <u>Juv.</u>	
	Temperament	<u>Friendly</u>	Sterilisation details	<u>NO</u>	Name	
	Coat <u>Short</u>	Tail <u>long</u>	Teeth Condition <u>Fair</u>	Ears <u>up</u>	Size <u>Small</u>	
	Area found / collected from <u>Witteklip plaas</u>					Date <u>28/05/24</u>
	Reason for surrender <u>can't afford.</u>					

ASSESSMENT		
GOOD WITH:	Yes	No
Children	☐	☐
Cats	☐	☐
Other Dogs	☐	☐
Livestock/Other	☐	☐
DO THEY:	Yes	No
Jump Fences	☐	☐
Run Away	☐	☐
COMMENTS:		

Surrendered by	☒ Name	<u>Perrené Kennemeyer</u>
Found by		
Residential Address	<u>Witteklip plaas</u>	
	<u>Vleesbaai</u>	
Postal Address	<u>N/A</u>	
Tel (H)	<u>N/A</u>	Tel (W)
		Cell <u>0649576433</u>
Email	<u>N/A</u>	
Donation R	<u>N/A</u>	Cash Card EFT (Receipt No.) <u>N/A</u>

PLEASE INSIST ON A RECEIPT

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

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 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>Refer to MBY2787</u>	Witness for Society <u>[Signature]</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: _____



MBY0107 + MBY0112.

ADMISSION NO

PRE AND POST HOME INSPECTION FORM DOMESTIC ANIMALS

PASSED: ☒ YES / ☐ NO

DATE UNDERTAKEN: 11-5-24

TIME: 14:15

NAME OF APPLICANT: L. Pelser

ADDRESS: 31 Con van der wath
Da Nava

HOME TEL No: CELL No: 084 058 1865

ANIMAL(S) ADOPTING: Cats x 2

SEX: Male

AGE: Juvenile.

PRE- HOME INSPECTION:

PROPERTY DESCRIPTION			
Type and height of fence: 2m wall	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?	none
Any hazards? (pool, rubble, razor wire, etc)	YES ☐ / NO ☒	Specify: none	
Does applicant live at the address?	YES ☒ / NO ☐	How many animals are on the property?	2

DESCRIPTION OF ANIMALS ON PROPERTY					
	1	2	3	4	5
BREED	Pomeranian	Pitbull			
CONDITION	good	good			
WELFARE (good?)	good	good			
SEX & AGE	♀ 1/10yrs	♀ 1/2y	1	1	1
STERILISED	YES ☒ / NO ☐	YES ☒ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐

OTHER INFORMATION / COMMENTS

Breed Home to Home the cats

PROPERTY APPROVED FOR THE FOLLOWING ANIMALS:

☒ CATS☐ SMALL DOGS☐ MEDIUM DOGS☐ LARGE DOGS

INSPECTED BY: Luciano Brey

SPCA: messelby

SIGNATURE: [Signature]

POST HOME INSPECTIONS

DATE	RESULT	REMARK	BY WHOM

DIAGRAM OF PROPERTY ON REVERSE OF THIS PAGE

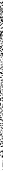
MY OWNER	L. Peltzer
STREET ADDRESS	31 Constanța Street
HOME PHONE	04 Nova
WORK PHONE	
CELLPHONE	084 058 1865
FEDERAL DATA	

ME

THE UNIVERSITY OF CHICAGO

卷之四

OF
THE
CITY OF
NEW YORK



NEXT VACCINATION DUE

DATE _____

DATE	DATE
27/06/24	

3 MSD
Animal Health

[illegible]

VET SIGNATURE

352016 R1

Butter
Milk
Egg

Robinson's

352716 R1

Batu Manti Bo.

Figure 1. The effect of the concentration of the *Agrobacterium* suspension on the transformation efficiency of *Agrobacterium* strains. The number of transformed cells was determined by the number of colonies on the selective medium. The results are the mean of three independent experiments. Error bars represent standard deviation.

Age Group	Male (%)	Female (%)
18-29	~45	~55
30-39	~55	~65
40-49	~65	~75
50-59	~75	~85
60+	~85	~95

[illegible]

1
 2
 3
 4
 5
 6
 7
 8
 9
 10
 11
 12
 13
 14
 15
 16
 17
 18
 19
 20
 21
 22
 23
 24
 25
 26
 27
 28
 29
 30
 31
 32
 33
 34
 35
 36
 37
 38
 39
 40
 41
 42
 43
 44
 45
 46
 47
 48
 49
 50
 51
 52
 53
 54
 55
 56
 57
 58
 59
 60
 61
 62
 63
 64
 65
 66
 67
 68
 69
 70
 71
 72
 73
 74
 75
 76
 77
 78
 79
 80
 81
 82
 83
 84
 85
 86
 87
 88
 89
 90
 91
 92
 93
 94
 95
 96
 97
 98
 99
 100
 101
 102
 103
 104
 105
 106
 107
 108
 109
 110
 111
 112
 113
 114
 115
 116
 117
 118
 119
 120
 121
 122
 123
 124
 125
 126
 127
 128
 129
 130
 131
 132
 133
 134
 135
 136
 137
 138
 139
 140
 141
 142
 143
 144
 145
 146
 147
 148
 149
 150
 151
 152
 153
 154
 155
 156
 157
 158
 159
 160
 161
 162
 163
 164
 165
 166
 167
 168
 169
 170
 171
 172
 173
 174
 175
 176
 177
 178
 179
 180
 181
 182
 183
 184
 185
 186
 187
 188
 189
 190
 191
 192
 193
 194
 195
 196
 197
 198
 199
 200
 201
 202
 203
 204
 205
 206
 207
 208
 209
 210
 211
 212
 213
 214
 215
 216
 217
 218
 219
 220
 221
 222
 223
 224
 225
 226
 227
 228
 229
 230
 231
 232
 233
 234
 235
 236
 237
 238
 239
 240
 241
 242
 243
 244
 245
 246
 247
 248
 249
 250
 251
 252
 253
 254
 255
 256
 257
 258
 259
 260
 261
 262
 263
 264
 265
 266
 267
 268
 269
 270
 271
 272
 273
 274
 275
 276
 277
 278
 279
 280
 281
 282
 283
 284
 285
 286
 287
 288
 289
 290
 291
 292
 293
 294
 295
 296
 297
 298
 299
 300
 301
 302
 303
 304
 305
 306
 307
 308
 309
 310
 311
 312
 313
 314
 315
 316
 317
 318
 319
 320
 321
 322
 323
 324
 325
 326
 327
 328
 329
 330
 331
 332
 333
 334
 335
 336
 337
 338
 339
 340
 341
 342
 343
 344
 345
 346
 347
 348
 349
 350
 351
 352
 353
 354
 355
 356
 357
 358
 359
 360
 361
 362
 363
 364
 365
 366
 367
 368
 369
 370
 371
 372
 373
 374
 375
 376
 377
 378
 379
 380
 381
 382
 383
 384
 385
 386
 387
 388
 389
 390
 391
 392
 393
 394
 395
 396
 397
 398
 399
 400
 401
 402
 403
 404
 405
 406
 407
 408
 409
 410
 411
 412
 413
 414
 415
 416
 417
 418
 419
 420
 421
 422
 423
 424
 425
 426
 427
 428
 429
 430
 431
 432
 433
 434
 435
 436
 437
 438
 439
 440
 441
 442
 443
 444
 445
 446
 447
 448
 449
 450
 451
 452
 453
 454
 455
 456
 457
 458
 459
 460
 461
 462
 463
 464
 465
 466
 467
 468
 469
 470
 471
 472
 473
 474
 475
 476
 477
 478
 479
 480
 481
 482
 483
 484
 485
 486
 487
 488
 489
 490
 491
 492
 493
 494
 495
 496
 497
 498
 499
 500
 501
 502
 503
 504
 505
 506
 507
 508
 509
 510
 511
 512
 513
 514
 515
 516
 517
 518
 519
 520
 521
 522
 523
 524
 525

1000

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100 101 102 103 104 105 106 107 108 109 110 111 112 113 114 115 116 117 118 119 120 121 122 123 124 125 126 127 128 129 130 131 132 133 134 135 136 137 138 139 140 141 142 143 144 145 146 147 148 149 150 151 152 153 154 155 156 157 158 159 160 161 162 163 164 165 166 167 168 169 170 171 172 173 174 175 176 177 178 179 180 181 182 183 184 185 186 187 188 189 190 191 192 193 194 195 196 197 198 199 200 201 202 203 204 205 206 207 208 209 210 211 212 213 214 215 216 217 218 219 220 221 222 223 224 225 226 227 228 229 230 231 232 233 234 235 236 237 238 239 240 241 242 243 244 245 246 247 248 249 250 251 252 253 254 255 256 257 258 259 260 261 262 263 264 265 266 267 268 269 270 271 272 273 274 275 276 277 278 279 280 281 282 283 284 285 286 287 288 289 290 291 292 293 294 295 296 297 298 299 300 301 302 303 304 305 306 307 308 309 310 311 312 313 314 315 316 317 318 319 320 321 322 323 324 325 326 327 328 329 330 331 332 333 334 335 336 337 338 339 340 341 342 343 344 345 346 347 348 349 350 351 352 353 354 355 356 357 358 359 360 361 362 363 364 365 366 367 368 369 370 371 372 373 374 375 376 377 378 379 380 381 382 383 384 385 386 387 388 389 390 391 392 393 394 395 396 397 398 399 400 401 402 403 404 405 406 407 408 409 410 411 412 413 414 415 416 417 418 419 420 421 422 423 424 425 426 427 428 429 430 431 432 433 434 435 436 437 438 439 440 441 442 443 444 445 446 447 448 449 450 451 452 453 454 455 456 457 458 459 460 461 462 463 464 465 466 467 468 469 470 471 472 473 474 475 476 477 478 479 480 481 482 483 484 485 486 487 488 489 490 491 492 493 494 495 496 497 498 499 500 501 502 503 504 505 506 507 508 509 510 511 512 513 514 515 516 517 518 519 520 521 522 523 524 525 526 527 528 529 530 531 532 533 534 535 536 537 538 539 540 541 542 543 544 545 546 547 548 549 550 551 552 553 554 555 556 557 558 559 560 561 562 563 564 565 566 567 568 569 570 571 572 573 574 575 576 577 578 579 580 581 582 583 584 585 586 587 588 589 590 591 592 593 594 595 596 597 598 599 600 601 602 603 604 605 606 607 608 609 610 611 612 613 614 615 616 617 618 619 620 621 622 623 624 625 626 627 628 629 630 631 632 633 634 635 636 637 638 639 640 641 642 643 644 645 646 647 648 649 650 651 652 653 654 655 656 657 658 659 660 661 662 663 664 665 666 667 668 669 670 671 672 673 674 675 676 677 678 679 680 681 682 683 684 685 686 687 688 689 690 691 692 693 694 695 696 697 698 699 700 701 702 703 704 705 706 707 708 709 710 711 712 713 714 715 716 717 718 719 720 721 722 723 724 725 726 727 728 729 730 731 732 733 734 735 736 737 738 739 740 741 742 743 744 745 746 747 748 749 750 751 752 753 754 755 756 757 758 759 760 761 762 763 764 765 766 767 768 769 770 771 772 773 774 775 776 777 778 779 780 781 782 783 784 785 786 787 788 789 790 791 792 793 794 795 796 797 798 799 800 801 802 803 804 805 806 807 808 809 810 811 812 813 814 815 816 817 818 819 820 821 822 823 824 825 826 827 828 829 830 831 832 833 834 835 836 837 838 839 840 841 842 843 844 845 846 847 848 849 850 851 852 853 854 855 856 857 858 859 860 861 862 863 864 865 866 867 868 869 870 871 872 873 874 875 876 877 878 879 880 881 882 883 884 885 886 887 888 889 890 891 892 893 894 895 896 897 898 899 900 901 902 903 904 905 906 907 908 909 910 911 912 913 914 915 916 917 918 919 920 921 922 923 924 925 926 927 928 929 930 931 932 933 934 935 936 937 938 939 940 941 942 943 944 945 946 947 948 949 950 951 952 953 954 955 956 957 958 959 960 961 962 963 964 965 966 967 968 969 970 971 972 973 974 975 976 977 978 979 980 981 982 983 984 985 986 987 988 989 990 991 992 993 994 995 996 997 998 999 1000 1001 1002 1003 1004 1005 1006 1007 1008 1009 1010 1011 1012 1013 1014 1015 1016 1017 1018 1019 1020 1021 1022 1023 1024 1025 1026 1027 1028 1029 1030 1031 1032 1033 1034 1035 1036 1037 1038 1039 1040 1

1
 2
 3
 4
 5
 6
 7
 8
 9
 10
 11
 12
 13
 14
 15
 16
 17
 18
 19
 20
 21
 22
 23
 24
 25
 26
 27
 28
 29
 30
 31
 32
 33
 34
 35
 36
 37
 38
 39
 40
 41
 42
 43
 44
 45
 46
 47
 48
 49
 50
 51
 52
 53
 54
 55
 56
 57
 58
 59
 60
 61
 62
 63
 64
 65
 66
 67
 68
 69
 70
 71
 72
 73
 74
 75
 76
 77
 78
 79
 80
 81
 82
 83
 84
 85
 86
 87
 88
 89
 90
 91
 92
 93
 94
 95
 96
 97
 98
 99
 100
 101
 102
 103
 104
 105
 106
 107
 108
 109
 110
 111
 112
 113
 114
 115
 116
 117
 118
 119
 120
 121
 122
 123
 124
 125
 126
 127
 128
 129
 130
 131
 132
 133
 134
 135
 136
 137
 138
 139
 140
 141
 142
 143
 144
 145
 146
 147
 148
 149
 150
 151
 152
 153
 154
 155
 156
 157
 158
 159
 160
 161
 162
 163
 164
 165
 166
 167
 168
 169
 170
 171
 172
 173
 174
 175
 176
 177
 178
 179
 180
 181
 182
 183
 184
 185
 186
 187
 188
 189
 190
 191
 192
 193
 194
 195
 196
 197
 198
 199
 200
 201
 202
 203
 204
 205
 206
 207
 208
 209
 210
 211
 212
 213
 214
 215
 216
 217
 218
 219
 220
 221
 222
 223
 224
 225
 226
 227
 228
 229
 230
 231
 232
 233
 234
 235
 236
 237
 238
 239
 240
 241
 242
 243
 244
 245
 246
 247
 248
 249
 250
 251
 252
 253
 254
 255
 256
 257
 258
 259
 260
 261
 262
 263
 264
 265
 266
 267
 268
 269
 270
 271
 272
 273
 274
 275
 276
 277
 278
 279
 280
 281
 282
 283
 284
 285
 286
 287
 288
 289
 290
 291
 292
 293
 294
 295
 296
 297
 298
 299
 300
 301
 302
 303
 304
 305
 306
 307
 308
 309
 310
 311
 312
 313
 314
 315
 316
 317
 318
 319
 320
 321
 322
 323
 324
 325
 326
 327
 328
 329
 330
 331
 332
 333
 334
 335
 336
 337
 338
 339
 340
 341
 342
 343
 344
 345
 346
 347
 348
 349
 350
 351
 352
 353
 354
 355
 356
 357
 358
 359
 360
 361
 362
 363
 364
 365
 366
 367
 368
 369
 370
 371
 372
 373
 374
 375
 376
 377
 378
 379
 380
 381
 382
 383
 384
 385
 386
 387
 388
 389
 390
 391
 392
 393
 394
 395
 396
 397
 398
 399
 400
 401
 402
 403
 404
 405
 406
 407
 408
 409
 410
 411
 412
 413
 414
 415
 416
 417
 418
 419
 420
 421
 422
 423
 424
 425
 426
 427
 428
 429
 430
 431
 432
 433
 434
 435
 436
 437
 438
 439
 440
 441
 442
 443
 444
 445
 446
 447
 448
 449
 450
 451
 452
 453
 454
 455
 456
 457
 458
 459
 460
 461
 462
 463
 464
 465
 466
 467
 468
 469
 470
 471
 472
 473
 474
 475
 476
 477
 478
 479
 480
 481
 482
 483
 484
 485
 486
 487
 488
 489
 490
 491
 492
 493
 494
 495
 496
 497
 498
 499
 500
 501
 502
 503
 504
 505
 506
 507
 508
 509
 510
 511
 512
 513
 514
 515
 516
 517
 518
 519
 520
 521
 522
 523
 524
 525

[illegible][illegible][illegible][illegible]

One of the very best things you can do to give me a strong and healthy life is to vaccinate me against common diseases. My mother gave me a milk, during my first few weeks by disease-fighting antibodies in her milk. Now this is to be done by giving me vaccines to protect me against diseases by my mother.

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), Quantar® Tablets (Reg. No. G2717 Act 36/1947) Contains Praziquantel (isoquine) 50 mg/tablet and Fenbendazole (benzimidazole) 500 mg/tablet, Exтел Plus (Reg. No. G4226 Act 36/1947) Contains Praziquantel 50 mg, Pyrantel 50 mg (equivalent to 144 mg pyrantel embonate) and Febantel 150 mg, Exтел 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, Fluralaner 525 mg, Bravecto® (Reg. No. G4083 Act 36/1947) each chew contains 25 mg Fluralaner per kg body weight.

Find us on
facebook.
facebook.com/BraemhillsSouthAfrica

[illegible]

ECTO

facebook.com/BravectoSouthAfrica



RABIES VACCINATION CONTRACT

PLEASE READ CAREFULLY - THIS IS A LEGAL DOCUMENT

CONTRACT No. MBY 0107

DATE: _____

between Mosselbay SPCA
and

Name L. Pelser

Address 31 Cm van der Wath str, Da Noua

Telephone Numbers (H) _____ (B) 084 058 1865

to have vaccinated against rabies **within one (1) month of the adoption/due date** (delete whichever is not applicable):

Animal's Name _____ Sex Male Age _____

Description Ginger

On (due date) _____ Adoption Form No. MBY 0107

on the understanding that you will arrange to have this done at the Mosselbay SPCA Veterinary Hospital.

1. Should the animal be taken to another Veterinary Hospital or Clinic for the vaccination without the written authorisation of this Society, the owner will be responsible for the payment of any fees incurred and the owner is obligated to provide the Society with proof of the vaccination within one (1) month of the date of adoption.
2. If the animal is not vaccinated on the due date mentioned above, the Society **reserves the right to repossess** 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 repossess and/or inspect the animal.
3. This animal cannot be passed on to a new owner. Refer to Adoption Contract.
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 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: MBY 0107 For SPCA: [Signature]

CONFIRMATION OF RABIES VACCINATION:

Vet: _____ Signed: _____

Date: _____

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):

M. L. Pelsier

HOME ADDRESS:

31 Con van der wath str Da Nover

ID NO.: 8612045081084

POSTAL ADDRESS:

31 Con van der wath str Da Nover

TEL NO (H):

(B):

CELL NO:

084 058 1865

FAX NO:

061 1970339 (wife)

EMAIL:

louis@pelsier²@gmail.com

Address where animal will be kept:

31 Con vander wath str Da Nover

Occupation:

Site Manager

Do you own or rent your property:

Rent

Do you have consent from owner / Body Corporate?

yes

YES/NO

Are you a student with consent to keep pets:

Reason for wanting animal: CAT LOVER!

YES/NO

Is the animal for yourself?

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?

DSH

Can you afford private fees?

yes

Who is your vet?

Herdent drive clinic

How many animals live on the property?

DOGS?

2

CATS?

0

OTHERS

0

What are the sexes of your animals?

DOGS: Male

Female

2

DOGS: Male

Female

Are all your animals sterilised? Give details

only one sterilised

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

DOGS?

2

CATS?

2

OTHER?

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

still have 2 dogs 2 cats passed

Is your property fenced and has a proper gate?

yes

Will you chain/ an animal?

no

Full description of the fencing and gate:

brick/palade/precast wall

Height:

1.8m

What shelter is provided: OUTDOORS

✓

KENNEL

✓

OTHER

inside for

Have you previously had pets from an SPCA?

No

Are there children under 10 in your household?

No

Pre Home Inspection Fee:

R100

Receipt No:

3473

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

[Signature]

Date of application

8 June 2024


REPUBLIC OF SOUTH AFRICA
NATIONAL IDENTITY CARD

Surname:
PEPLER
 Names:
MARIA MAGDALENA
 Sex:
F
 Nationality:
RSA
 Identity Number:
7910040230061
 Date of Birth:
04 OCT 1979
 Country of Birth:
RSA
 Status:
CITIZEN


 Signature:

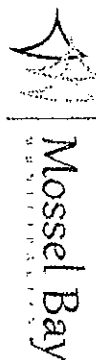

Conditions:
 Date of Issue:

This card has been issued by the
 Department of Home Affairs in terms of the
 Identification Act, Act 68 of 1997.
 29 JUL 2016

If found please return to the Department of Home Affairs
 For enquiry or verification purposes contact 0800 80 11 90


102617693



MOSSSEL BAY MUNICIPALITY
MOSSELBAY MUNISIPALITEIT
UMASIPALA WASEMOSSSELBAYI

Naam: VERTUE AC
Liggingadres: 31 CON VAN DER WATSTRAAT DA NOVA
BELASTING FAKTUR: MAANDELIJKE REKENING

REKENINGNUMMER:	67-084272-006-6
DATUM VAN REKENING:	23/05/2024
LAASTE KWITANSIE DATUM:	22/05/2024
VOORAFBETALDE METERNUMMER:	01348021757

GERISTE GBOORSTO:	260.00	ENC NUMMER:	4272000	TOTALE WAARDAGIE:	1475000	WVK No:	8
----------------------	--------	----------------	---------	----------------------	---------	------------	---

DATUM	BESONDERHEDE	LESINGDATUM: 06/05/24	BEDRAG
21/05/2024	01348021757/ELEKTRISITEIT 26/04/2024-19/05/2024	BALANS OORREKENING	1754.89
		BASIES	434.40*
21/05/2024	1	VAT/STW	319.90*
		WATER 05/04/2024-06/05/2024	
		9787 - 9799 (12 Kl 51 Dae)	
		BASIES	224.17
		07/23	0.00
		5.12 @	54.01
		5.88 @	41.72
21/05/2024	300008	VAT/STW	274.89*
21/05/2024	400008	KROOL	316.44*
		BELASTING PAIEMENT	408.93
		KWITANSIES	1754.00*
		Balans oortgedra	0.45*
		BTW op items:	175.50
		ACB TOT:	0.00

R 434.40
R 319.90
R 274.89
R 1029.19

KREDIET	60 DAE	30 DAE	LOPEND	Amount Due
0.00	0.00	0.00	1755.45	1755.00
BETALINGS MOET OP OF VOOR DIE VERVALDATUM GERAAK WORD				
BETAALBAAR OP 18/06/2024				BEDRAG BETAALBAAR 1755.00

VAT No.: 879 Nr. 483018270

101 Marsh Street
Private Bag X 29
MOSSSEL BAY
6500

(044) 606 5000
(044) 606 5062
admin@mosselbay.gov.za
www.mosselbay.gov.za

Payment Details / Betalings Besonderhede

PREDEFINED BENEFICIARY:
Standard Bank MOSSSEL BAY MUNICIPALITY

Vermys. Nr.: 670042720066

11379 670042720066

Standard Bank is now the Primary banker for the
MOSSSEL BAY MUNICIPALITY.

Municipal customers, service providers, members
of the public and various stakeholders are therefore
informed of the new banking partner for the
MOSSSEL BAY MUNICIPALITY.

The municipality has been added as a predefined
beneficiary on the Bank Directory.



Mossel Bay
MUNICIPALITY

VERTUE AC
POSBUS 10287
DANABAAI

6510



670042720066

Fold and tear on perforation.

je nreks ua nov

STORY

SEEFF MOSSEL BAY

BRANCHES:

DANA BAY 044 698 1677,
HARTENBOS 044 695 1216, GREATBRAK 044 620 2428,
MOSSEL BAY 044 690 4477
083 797 9312

Seeff

Expertise Built Through Generations of Trust

To whom it may concern,

13 June 2024

RE MR AND MRS PELSER – 31 CON VD WATH STREET, DA NOVA, MOSSEL BAY

Good day,

We hereby confirm that Mr and Mrs Pelser is renting the above-mentioned property from Seeff Mossel Bay on a long term starting from the 1st January 2024 on a 12 month contract.

Please do not hesitate to contact us should you have any more questions.

Kind Regards,

Elize Strydom
Professional Property Consultant
Seeff Mossel Bay
082 853 4603
Elize.strydom@seeff.com

Seeff Mossel Bay | Co. Reg. No. 2010/116864/23 | Vat No. 4300266105 | Director & Licensee Dr Kaaïman Schutte
PPRA Registered

Seeff

Expertise Built Through Generations of Trust

Expertise Built Through Generations of Trust | www.seeff.com

MICROCHIPPED ANIMAL REGISTRATION FORM

MICROCHIP NUMBER



992003000356208

VET OR WELFARE ORGANISATION

Vet Practice Number *

Vet Practice Name *

Vet Practice Phone - Daytime *

PET OWNER INFORMATION

Cell No. * 084 058 1865

E-mail * louispeiser02@gmail.com

Title * MR Initials * L

Street 31 Con van der Wath

Suburb

Country

Phone - Day time

OTHER CONTACTS

Title * Initials *

Cell No. *

Title * Initials *

Cell No. *

Title * Initials *

Cell No. *

CHIP DETAILS

Registration Date *

Date of Implant * 13 - 06 - 2024

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

Name of Vet who implanted the Chip LUCIANO BAYI

PET DETAILS

Pet Name PEANUT

Species * CAT

Colour GINGER

Gender ☒ Male ☐ Female

KENNEL UNION OF SOUTH AFRICA (KUSA)

Are you a KUSA Registered Member? Yes ☐ No ☐

KUSA Registration Number

Pet Registered Name

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, Botswana and Namibia will be receiving SMS notifications.

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

Surname * PEISER

City

Area Code DA NOUA

Province

Phone - Night time

Surname *

Surname *

Surname *

Date of birth 2024

Breed * OSH

Markings

Sterilised ☒ Yes ☐ No

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 MEPICK

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