

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 13/02/2025
- ☒ Copy of Vaccination Record/ Certificate
- ☒ Microchip
- ☒ Microchip Registration chip number _____

ADMISSION NO:

MBY 5507

CONTRACT NO:

MA00041T

Adoptee INFO:

Name & Surname Velizca Barnard

Contact INFO: 082 699 2385

Completed by: [Signature]

Date: 14/02/2025

Manager: [Signature]

Date: 14/02/2025

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.

MICROCHIPPED ANIMAL REGISTRATION FORM

MICROCHIP NUMBER



992003000486828

VET OR WELFARE ORGANISATION

Vet Practice Number *

Vet Practice Name *

Vet Practice Phone - Daytime *

PET OWNER INFORMATION

Cell No. * 082 699 2385

E-mail * Velizca9402@gmail.com

Title * MRS Initials * V

Street 50 Da Gama

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 * 14 - 02 - 2025

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

Name of Vet who implanted the Chip BHO SMITH

PET DETAILS

Pet Name CLEO

Species * CANINE

Colour BROWN

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 * Barnard

City

Area Code Da Nova

Province

Phone - Night time

Surname *

Surname *

Surname *

Date of birth 2025

Breed * GSD x

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

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

- On-line Log onto www.backhome.co.za. Complete the registration process.
- By fax Fax this completed form to BackHome on 0800 222 546 (TOLL FREE) or 011 852 6364
- By e-mail Scan and E-mail the completed form to backhome@virbac.co.za or backhome.support.external@virbac.co.za
- By App Download the Virbac Backhome Africa App

ADMISSION, ASSESSMENT AND HISTORY RECORD

loaded.



Garden Route

KENNEL No. <u>K250 31</u>				ADMISSION No. <u>MBY5507</u>		
Stray	<u>Surrender</u>	Abandoned	Returned	Impounded	Confiscated	Request for euthanasia
Date in	<u>26/01/25</u>		Time in		Date for release	

IDENTIFICATION & LOST AND FOUND			Lost & Found checked	☒ Yes ☐ No	Lost & Found Date checked	<u>26/01/25</u>
Microchip/Collar or ID tag found	☒ Yes ☐ No	Date scanned or checked	<u>26/01/25</u>	Microchip or ID Tag number	<u>None</u>	

DESCRIPTION & HISTORY	☒ Dog	Cat	Other species (Specify) <u>B/I</u>			
	Breed	<u>X Breed</u>	Colour and Markings <u>Dark brown with black fluffy hair</u>			
	Condition	<u>Fair</u>	Sex	<u>♀</u>	Age <u>± 2 months</u>	
	Temperament	<u>Fair</u>	Sterilisation details		Name	
	Coat <u>S</u>	Tail <u>L</u>	Teeth Condition <u>Fair</u>	Ears <u>hang</u>	Size <u>S</u>	
	Area found / collected from <u>Tarka</u>					Date <u>26/01/25</u>
	Reason for surrender <u>To many dogs.</u>					

ASSESSMENT		Surrendered by		Name		<u>M. Saayman</u>	
GOOD WITH:		Found by					
Children	☐ Yes ☐ No	Residential Address		<u>Tarka</u>			
Cats	☐ Yes ☐ No	Postal Address		<u>No postal</u>			
Other Dogs	☐ Yes ☐ No	Tel (H) <u>No num</u>		Tel (W) <u>No num</u>		Cell <u>No num</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	☐ Yes ☐ No						
Run Away	☐ Yes ☐ No						
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 / 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 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 uitdrukk 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 MBY 5269.</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: _____



Mossel Bay
MUNICIPALITY

MOSSSEL BAY MUNICIPALITY
MOSSSELBAAI MUNISIPALITEIT
UMASIPAL/A WASEMOSSSELBAYI

ACCOUNT NUMBER: 67-004336-001-4

DATE OF ACCOUNT: 22/01/2025

LAST RECEIPT DATE: 21/01/2025

PREPAID METER NUMBER: 04206492730

VAT REG. NO.
Name:
BARNARD J
Street Address:
50 DA GAMASTRAAT DA NOVA
TAX INVOICE MONTHLY ACCOUNT

SERVICE DEPOSIT:	3260.00	ENR NUMBER:	4336000	TOTAL VALUATION:	1700000	WARD No:	8
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DATE	DETAILS	AMOUNT
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20/01/2025	04206492730ELECTRICITY	
	B/F BALANCE	4427.54
	BASIC	451.54 *
	VAT/BTN	392.65
		58.69

20/01/2025	SEN2430047WATER 03/12/2024-07/01/2025	
	272 ~ 327 (55 Kl 35 Days)	1093.67 *
	BASIC	237.63
	07/24	6.90 @ 0.000 = 0.00
		16.11 @ 9.737 = 156.87
		11.51 @ 12.658 = 145.70
		11.51 @ 16.456 = 189.41
		8.97 @ 24.684 = 221.41
	VAT/BTN	142.65

20/01/2025	400008	SEWERAGE	335.43 *
20/01/2025	300008	REFUSE	299.64 *
20/01/2025		RATES INSTALLMENT	539.04
		RECEIPTS	1800.00-
		Balance Carried Forward	0.00
		VAT ON *** ITEMS:	284.37
		ACB TOT:	0.00

CREDIT	60 DAYS	30 DAYS	CURRENT	AMOUNT DUE
0.00	0.00	2627.54	2719.32	5346.00

PAYMENT MUST BE MADE ON OR BEFORE DUE DATE	DUE DATE	AMOUNT DUE
	17/02/2025	5346.00

VAT No. / BTW Nr: 4830118370
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 / Betaalings Besonderhede

PREDEFINED BENEFICIARY.
MOSSSEL BAY MUNICIPALITY
REF NO. 670043360014



Message / Boodskap

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

BARNARD J
DA GAMASTRAAT 50
DA NOVA
MOSSSELBAAI
6506





MA00041 T

**APPLICATION TO ADOPT AN ANIMAL**

PLEASE NOTE: We retain the right to decline this application

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

NAME - Prof/Dr/Mr/Mrs/Ms (including initials): MRU V. BamarelHOME ADDRESS: 50 Da Gama ; Do Nova , Moreira Bay
6506 ID NO.: 9400160876081POSTAL ADDRESS: 50 Da Gama ; Do Nova , Moreira BayTEL NO (H): - (B): -CELL NO: 082 699 2385 FAX NO: -E-MAIL: velizca9402@gmail.comAddress where animal will be kept: 50 Da Gama str. Do Nova ; Moreira BayReason for wanting an animal: Other dogs are getting old. We fell in love with her.Occupation: Professional Nurse.Do you own or rent your property: OWN Do you have consent from owner / Body Corporate? NAAre you a student with consent to keep pets? YES ☒ NO ☐Reason for wanting an animal: We fell in love with Cleo. Our daughter is young and we want a puppy to grow up with her.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? Any breedCan you afford private veterinary fees? YES Who is your vet? Dr VanderHow many animals live on your property DOGS 2 CATS - OTHER -What are the sexes of your animals? DOGS: Male 01 Female 1 CATS: Male - Female -Are all your animals sterilised? Give details No. The female will be sterilized on Thursday. The males are to did (2124 years)How many dogs and cats have you owned over the past 3 years? DOGS 2 CATS - OTHER -Which animals do you still have, and what happened to the others? NAIs your property fenced and has a proper gate? YES Will you chain/cage an animal? NOFull description of the fencing and gate: Painted & brick wall Height: 1.8mWhat shelter is provided: OUTDOORS - KENNEL - OTHER indoorHave you previously had pets from an SPCA? NO Are there children under the 10 years in your household? YESPre Home Inspection Fee: R100 Receipt No.: MBY 5621**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 07/02/2005



ADOPTION CONTRACT

DOG/CAT	Breed	Male/Female	ADMISSION NO: MBY 5507
Microchip and		992003000486828	

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.

1. I do hereby confirm and undertake that:
 2. I am over eighteen (18) years of age.
 3. All family members agree to the adoption and will abide by the conditions in the contract.
 4. 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.
 5. I will give the animal a fair chance to adjust to its new home.
 6. I understand that donations are not refundable or transferable.
 7. I will feed and house the animal to the Society's satisfaction.
 8. 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.
 9. I can afford the services of a private veterinary practitioner.
 10. I will ensure that vaccinations are kept up to date and in the case of injury or illness professional veterinary treatment will be provided.
 11. I understand that in the 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.
 12. I will ensure that the animal is sterilised as stipulated by the Society.
 13. I undertake to ensure that the animal has identification at all times, either in the form of a microchip or a collar and tag - only elasticised or quick release collars may be used for cats.
 14. My property is adequately enclosed and at no time shall I knowingly allow my dog to roam the streets.
 15. I will notify the Society within forty-eight (48) hours should the animal die or go missing.
 16. I know and understand the "By-Laws pertaining to animals" of the Municipality in which I reside.
 17. I will permit an authorised officer of the 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.
 18. I will not use or allow the animal to be used as a watchdog on any industrial or commercial premises.
 19. I will notify the Society of any change of address in writing by registered post within 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): Velizca Barnard
 HOME ADDRESS: 50 Da Gama, Da Nova, Mosselbay ID/PASSPORT NO.: 9402160876081
 TEL NO (H): _____ (B): _____
 CELL NO: 082 699 2385 FAX NO: _____
 E-MAIL: velizca9402@gmail.com
 ADOPTION FEE: R850 cash / card/ eft DONATION: _____ RECEIPT No. 5637
 VEHICLE REG. No. CBV 61368 VEHICLE MAKE: Volkswagen COLOUR Blue
 SIGNATURE: Barnard WITNESS FOR SOCIETY: [Signature]
 DATE: 14/02/2025



REPUBLIC OF SOUTH AFRICA
NATIONAL IDENTITY CARD

Surname:
BARNARD
Names:
VELIZCA
Sex:
F
Nationality:
RSA
Identity Number:
9402160876081
Date of Birth:
16 FEB 1994
Country of Birth:
RSA
Status:
CITIZEN



Signature:


Conditions:
This card has been issued by the
Department of Home Affairs in terms of the
Identification Act, Act 68 of 1997
If found please return to the Department of Home Affairs
For enquiry or verification purposes contact 0800 50 11 90

Date of Issue:
25 MAR 2021

RSA

114281509



**Society for the Prevention
of Cruelty to Animals**

Incorporated Association not for gain

NPO No.: 003-629

PBO No.: 130004687



GARDEN ROUTE

**Dierebeskermings-
vereniging**

Ingelyfde Vereniging sonder winsoogmerk

(GEO) 044 878 1990

(GEO) 082 378 7384

Ossie Urban Rd, George, 6529

P.O Box 258, George, 6530

www.grspca.co.za

(M/B) 044 693 0824

(M/B) 072 287 1761

18 Bill Jeffery St, Mossel Bay, 6506

P.O Box 258, George, 6530

www.grspca.co.za

DATE: 12/02/25

ATTENTION: MOSSEL BAY MUNICIPALITY

REGARDING: PERMISSION REQUEST FOR ADDITIONAL DOMESTIC ANIMALS ON A PROPERTY

Name of applicant: _____

Contact number: _____

Address of premises: _____

To whom it may concern,

We have completed a welfare inspection with the following findings:

Concerns	Yes	No
Water available		
Adequate shelter available		
Adequate space available		
Clean living environment		
Animal/s chained / tethered / caged		
Animal/s in good condition		
Veterinary problems / health concerns		

Note: Any concerns noted must be explained below in the Report/Findings.

Report/Findings:

List animals seen:

SPCA INSPECTOR / FIELD OFFICER:

Wally Wagenaar

SIGNATURE:

[Signature]



PRE HOME NO

MPRE 076

ADMISSION NO

MB1 5507.

PRE HOME INSPECTION FORM DOMESTIC ANIMALS

PASSED: ☒ YES / ☐ NO

DATE UNDERTAKEN: 12/02/25

TIME: 11h11

NAME OF APPLICANT: Yelizza Barnard.

ADDRESS: 50 Da Gama Road, Da Nova.

HOME TEL No: CELL No: 082 699 2385.

ANIMAL(S) ADOPTING: X Breed

SEX: Female. AGE: 2 months.

PRE- HOME INSPECTION:

PROPERTY DESCRIPTION			
Type and height of fence:	Bricks &		
Suitable shelter? (i.e. Kennel in protected area)	YES ☒ / NO ☐	Suitability of fence (i.e. small pets can't escape):	
Is the front yard separated from the back?	YES ☐ / NO ☒	Any sign of Chain/Runner?	YES ☐ / NO ☒
Any hazards? (pool, rubble, razor wire, etc)	YES ☐ / NO ☒	If yes, what partitioning?	
Does applicant live at the address?	YES ☒ / NO ☐	Specify:	
		How many animals are on the property?	2

DESCRIPTION OF ANIMALS ON PROPERTY

	1	2	3	4	5
BREED	Rotweiler	XBreed			
CONDITION	Fair	Fair			
WELFARE (good?)	Fair	Fair			
SEX & AGE	6 / ♀	12 / ♂	1	1	1
STERILISED	YES ☒ / NO ☐	YES ☐ / NO ☒	YES ☐ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐

Too old

OTHER INFORMATION / COMMENTS

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



INSPECTION FORM MUNICIPALITY

PASSED: ☒ YES / ☐ NO DATE UNDERTAKEN: 12/02/25 TIME: 11h11
NAME: Velizca Barnard
ADDRESS: 50 Da Gama Road Da Nova
HOME TEL No: _____ CELL No: 082 699 2385

HOME INSPECTION:

PROPERTY DESCRIPTION

Type of fence: <u>Bricks & intergate</u>	Height of fence: <u>1.6</u>
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?
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? <u>2</u>

DESCRIPTION OF ANIMALS ON PROPERTY

	1	2	3	4	5
BREED	<u>Rotweiler</u>	<u>XBreed</u>			
SEX	<u>Female</u>	<u>Male</u>			
AGE	<u>6 YEAR</u>	<u>12 YEARS</u>			
CONDITION	<u>Fair</u>	<u>Fair</u>			
STERILIZED	YES ☐ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐

OTHER INFORMATION / COMMENTS

Rotweiler gonna be sterilized tomorrow
and the XBreed to old. Property big lots of space and
playground.

INSPECTED BY: Wally Wagenaar SPCA: MBAY SPCA SIGNATURE: [Signature]



INSPECTION FORM MUNICIPALITY

PASSED: ☒ YES / ☐ NO DATE UNDERTAKEN: 12/02/25 TIME: 11h11
NAME: Velizca Barnard
ADDRESS: 50 Da Gama Road Da Nova
HOME TEL No: CELL No: 082 699 2385

HOME INSPECTION:

PROPERTY DESCRIPTION

Type of fence: Bricks & intergate	Height of fence: 1.6
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?
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? 2

DESCRIPTION OF ANIMALS ON PROPERTY

	1	2	3	4	5
BREED	Rotweiler	XBreed			
SEX	Female	Male			
AGE	6 YEAR	12 YEARS			
CONDITION	Fair	Fair			
STERILIZED	YES ☐ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐

OTHER INFORMATION / COMMENTS

Rotweiler gonna be sterilized tomorrow and the XBreed to old. Property big lots of space and playground.

INSPECTED BY: Wally Wagenaar SPCA: MBAY SPCA SIGNATURE:



MOSSSEL BAY MUNICIPALITY
P O Box 25
Mossel Bay
6500

Tel No: +27 (044) 606 6201
Fax No: +27 (044)
e-mail: admin@mosselbay.gov.za
Web site: www.mosselbaymun.co.za

SURROUNDING RESIDENT'S CONSENT FORM

SUBJECT PROPERTY (Erf number, Suburb, town & Street address):

48 Da Gama Street, Mossel Bay, Da Nova, 6506.

BRIEF DESCRIPTION re APPLICATION:

We have 3 older dogs and would like to adopt a puppy that can grow up a little before the others pass

CONSENT OF SURROUNDING RESIDENT'S: *allay*

I / We the undersigned residents of surrounding properties, confirm that I / we are informed of the applicants intention in respect of the abovementioned application and that I / we have no objection in keeping more than two (2) dogs and/or two (2) cats on the stated property. They do not cause any disturbance or nuisance.

Name of resident	Physical address	Signature
J LADMAN	48 Da Gama Str, Da Nova	
T v Luyk	52 Da Gama str Da Nova	
M Pender	41 Da Gama Street, Da Nova, Mossel Bay	
P Grundlingh	39 DA GAMASJR DA Nova.	

I hereby confirm that the above signatures were obtained from the stated residents.

SIGNATURE OF APPLICANT

DATE 11/02/2025

