ADOPTION CHECKLIST

ADMISSION NO: MBY 5970

CONTRACT NO: MA0017

- [x] Admission Form
- [x] Application for adoption
- [x] Pre-Home Inspection Report
- [x] Adoption contract
- [x] Copy of Identity Document or Driver's License
- [x] Proof of Residence
- [X] Letter from Body Corporate
- [X] Sterilization Contract and Date of sterillzation Contract Came in already done.
- [x] Copy of Vaccination Record/ Certificate
- [x] Microchip
- [x] Microchip Registration- chip number 992003000548341 07/05/25

Adoptee INFO:

Name & Surname: Gladys van Rooyen

Contact INFO: 0833008602

Completed by: [signature] Date: 02/05/25

Manager: [signature] Date: _____

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.

Virbac BackHome
Pet Certificate

Backhome

Dear Pet Owner,

Thank you for choosing BackHome and welcome to the BackHome family. Please keep your BackHome certificate in a safe place. It contains your details as registered on the BackHome national central database.

Please go to our website or download our app where you can conveniently look up or manage your details and that of your pets. For example you can update temporary addresses if you are going away, you can manage your contact details, and keep track of medical conditions of your pets.

You can login to the website and the app with the same details.
BackHome website (**www.backhome.co.za**) or download the BackHome App (from AppStore or PlayStore).

Alternatively you can contact us
E-mail: backhome@virbac.co.za
Phone: 011 027 8837 (weekdays 8:00 am - 5:00 pm)
Fax: 0800 222 546
Mail: Private Bag X115, Halfway House, 1685

Thank you for being a responsible pet owner in having your pet microchipped. Please keep your details updated – we hope your pet is always safe and never gets lost – but now you have an added security if that should ever happen.

Pet Information

Pet Details

Pet Name:		ROOY	
Pet Registered Name:			
Date of Birth:		01 Jan 1970	
Species:	Feline	Breed:	Siamese
Gender:	Male	Sterilised:	Yes
Colour:	SIAMESE		
Markings:			

KUSA

KUSA registered?	No
KUSA Number:	

Microchip Information

Microchip Number:	992003000548341
Dates: Registered:	07 May 2025
Implanted:	03 May 2025
Name of Welfare Organisation that implanted Chip :	Garden Route SPCA Mosselbay
Person who implanted chip:	BHO SMITH

Medical

Medical Insurance Co:	
Medical Insurance Number:	
Medical Insurance Co Tel:	
Medical Conditions:	

Owner Information

Contact Details

Owner Name:	GLADYS VAN ROOYEN
Email:	gladys.vanrooyen1@gmail.com
Work Phone:	
Home Phone:	
Mobile:	+27 833008602

Address

Address:	22 PINE ROAD
Suburb:	HEATHERLANDS
Town/City:	GEORGE
Province:	Western Cape
Country:	South Africa
Area Code:	

Other Contacts

5970
Guermo

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): Gladys van Rooyen

HOME ADDRESS: 22 Pine Road, Heather Park, George

ID NO.: 6412190027087

POSTAL ADDRESS: AS ABOVE

TEL NO (H): N/A (B): N/A

CELL NO: 0833008602 FAX NO: N/A

EMAIL: gladys.vanrooyen1@gmail.com

Address where animal will be kept: AS ABOVE

Occupation: PENSIONER

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

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

Reason for wanting animal: Company for my other cat I adopted @ KAWS 2024

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? SIAMESE X

Can you afford private fees? YES Who is your vet? EDEN SMALL VET

How many animals live on the property? DOGS? 1 CATS? 1 OTHERS

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

Are all your animals sterilised? Give details Yes both

How many dogs and cats have you owned in the last 3 years? DOGS? 2 CATS? 1 OTHER?

Which animals do you still have, and what happened to the others? One dog died of heart failure.

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

Full description of the fencing and gate: Wall, palisade + chicken wire. Height: 6M

What shelter is provided: OUTDOORS KENNEL OTHER INDOORS

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

Pre Home Inspection Fee: R100 Receipt No: 6973

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 GG **Date of application** 22/04/2025

Backhome

Virbac

* COMPULSORY FIELDS
* PRINT INFORMATION

MICROCHIPPED ANIMAL REGISTRATION FORM

MIC

992003000548341

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 *

Vet Practice Name *

Vet Practice Phone - Daytime *

PET OWNER INFORMATION

Cell No. * 0833008602

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

E-mail * gladysvanrooyen1@gmail.com

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

Title * MRS Initials * G. Surname * VAN ROOYEN

Street 22 PINE ROAD City

Suburb HEATHER PARK Area Code GEORGE

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 * 07 - 05 - 2025

Date of Implant * 03 - 05 - 2025

Was the Microchip implanted by this veterinary practice? (Yes) No

Name of Vet who implanted the Chip BHO SMITH

PET DETAILS

Pet Name Date of birth

Species * FELINE Breed * SIAMESE

Colour CREAM + BLACK Markings

Gender (Male) Female Sterilised (Yes) No

KENNEL UNION OF SOUTH AFRICA (KUSA)

Are you a KUSA Registered Member? Yes No

KUSA Registration Number

Pet Registered Name

MEDICAL

Medical Conditions

Medical Insurance Company

Medical Insurance Policy Number

Medical Insurance Phone

PROTECTION OF PERSONAL INFORMATION LAW

The client hereby agrees that his / her personal information herein supplied and / or any of his / her personal information already in possession of the veterinarian may be processed by the said Veterinarian and / or 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 he/she consents to its personal information being used by _____ and 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	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

MY OWNER

NAME	Gladys van Rooyen
POSTAL ADDRESS	
STREET ADDRESS	22 Pine Road
	Heather Park, George
HOME PHONE	
WORK PHONE	
CELLPHONE	0833008602
BREEDER DETAILS	

ME

SPECIES	FELINE
BREED	SIAMESE
COLOUR	CREAM + BLACK
SEX	MALE
DATE OF BIRTH	
MICROCHIP/TATTOO	992003000548341
FEATURES/MARKS	

NEXT VACCINATION DUE

DATE	DATE	DATE
06/05/25		

I WAS VACCINATED ON

DATE	VACCINE AND BATCH NO.	VET SIGNATURE
08/04/25	Ser: 020613918 Exp: 12-APR-2025 + milpro	AWA
	MSD Animal Health	
	MSD Animal Health	
	MSD Animal Health	
	MSD Animal Health	
	MSD Animal Health	
	MSD Animal Health	
	MSD Animal Health	
	MSD Animal Health	
	MSD Animal Health	
	MSD Animal Health	

I WAS VACCINATED ON

DATE	VACCINE AND BATCH NO.	VET SIGNATURE
	MSD Animal Health	
	MSD Animal Health	
	MSD Animal Health	
	MSD Animal Health	
	MSD Animal Health	
	MSD Animal Health	
	MSD Animal Health	
	MSD Animal Health	
	MSD Animal Health	
	MSD Animal Health	
	MSD Animal Health	

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 Act36/1947), **Nobivac® KC** (Reg. No. G2604 Act 36/1947). **Nobivac® Canine-1 DAPPV** (Reg. No. G3892 Act 36/1947), **Nobivac® Feline-HCP** (Reg. No. G3880 Act36/1947), **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 (isoqinoline) 50 mg/tablet and Fenbendazole (benzimdazole) 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.

Needs to show proof of vaccination for 1x Dog, 1x Cat

Section 4-5B: Page 1

POST HOME NO GPOST 026

PRE HOME NO

POST HOME INSPECTION FORM DOMESTIC ANIMALS

CONTACT NO

PASSED: (YES) / NO DATE UNDERTAKEN: 30/04/2025 TIME: 3:47 pm

NAME OF APPLICANT: Mrs Gladys Van Rooyen

ADDRESS: 22 Pine road Heatherpark, George

HOME TEL No: CELL No: 0833008802

ANIMAL(S) ADOPTING: Feline, Cat

SEX: Male AGE: 5 months

PRE- HOME INSPECTION:

PROPERTY DESCRIPTION			
Type and height of fence: Wall/Palisade/Mesh/Wire chicken 1.5 metres - 2 metres		Suitability of fence (i.e. small pets can't escape): Secure	
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?	2 gates
Any hazards? (pool, rubble, razor wire, etc)	YES ☐ / NO ☒	Specify:	
Does applicant live at the address?	YES ☒ / NO ☐	How many animals are on the property?	3

DESCRIPTION OF ANIMALS ON PROPERTY					
	1	2	3	4	5
BREED	Dashhund	Pug	S		
CONDITION	Acceptable	Acceptable	Acceptable		
WELFARE (good?)	Good	Good	Good		
SEX & AGE	F 11 years	F / 7 years	F 3 years	/	/
STERILISED	☒ / NO ☐	YES ☒ / NO ☐	YES ☒ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐

OTHER INFORMATION / COMMENTS Property is secure enough for animals, Animal Lovers

PROPERTY APPROVED FOR THE FOLLOWING ANIMALS:

- ☒ **CATS**
- ☒ **MEDIUM DOGS**
- ☒ **SMALL DOGS**
- ☐ **LARGE DOGS**

INSPECTED BY: Israel **SPCA:** George **SIGNATURE:**

POST HOME INSPECTIONS

DATE	RESULT	REMARK	BY WHOM

DIAGRAM OF PROPERTY ON REVERSE OF THIS PAGE

ADMISSION, ASSESSMENT AND HISTORY RECORD

DBV SPCA
Garden Route

KENNEL No.	CS2 CS			ADMISSION No.	MBY5970	
Stray	Surrender	Abandoned	Returned	Impounded	Confiscated	Request for euthanasia
Date in	14/03/25		Time in		Date for release	

IDENTIFICATION & LOST AND FOUND				Lost & Found checked	Yes / No	Lost & Found Date checked	
Microchip/Collar or ID tag found	Yes / No	Date scanned or checked	14/03/25	Microchip or ID Tag number			

DESCRIPTION & HISTORY

Dog	Cat	Other species (Specify)			
Breed	Siamese		Colour and Markings	Cream + black	
Condition	Fair		Sex	Male	Age
Temperament	Fair		Sterilisation details	Yes	Name
Coat Short	Tail long	Teeth Condition Fair	Ears up		Size M
Area found / collected from	Grootbrak, collected on 13/03/25				Date 14/03/25
Reason for surrender	Can't keep them				

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

Surrendered by / Found by	✓	Name	Sonja Stander		
Residential Address	5 Eureka Str Eureka Park				
Postal Address	Grootbrak				
Tel (H) N/A	Tel (W) N/A	Cell 071893010			
Email	N/A				
Donation R N/A	Cash	Card	EFT	(Receipt No.) N/A	

PLEASE INSIST ON A RECEIPT

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

STATEMENT OF SURRENDER

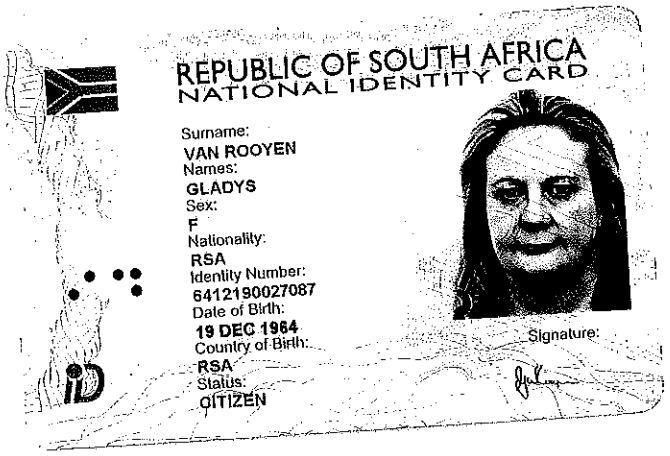
I do hereby certify that I ~~DO / DO NOT~~ own the animal/s described above, that **IT IS / IT ~~IS NOT~~** a stray and ~~**DO / DO NOT**~~ know where it comes from. I also freely surrender all interest, if any, therein to the SPCA, and I request that the animal be dealt with as deemed advisable in the 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 uitdrukiik 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 Refer to MBY 5789	Witness for Society

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

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



REPUBLIC OF SOUTH AFRICA
NATIONAL IDENTITY CARD

Surname:
VAN ROOYEN
Names:
GLADYS
Sex:
F
Nationality:
RSA
Identity Number:
6412190027087
Date of Birth:
19 DEC 1964
Country of Birth:
RSA
Status:
CITIZEN

Signature:

GEORGE MUNISIPALITEIT
Belasting Faktuur

GEORGE
BTW Nr. 4630193664
POSBUS 19, GEORGE, 6530
(044) 801-9111 086 589 6402
EPOS: accounts@george.gov.za

EMAIL

GRG 1001593274

Mnr./Me. DL&G VAN ROOYEN
22 PINE ROAD
HEATHERPARK
GEORGE
6529

DATUM VAN REKENING	24/04/2025
BELASTING FAKTUUR NR.	12126160
REKENING NR.	GRG 1001593274
KWITANSIES GEPOS TOT	23/04/2025
WAARBORG / DEPOSITO	0 / 800.00-
AREA	08 5416 00000
WAARDASIE	3300000
LIGGING:	PINEWEG 22
VERSKULDIG DEUR HUURDERS	0.00
KLIËNT BTW NR.	

DIENS	OPENINGS BALANS	KWITANSIES	HEFFING	RENTE	REGSTELLINGS	BTW	SLUITINGS BALANS
	0.00	0.00	271.61	0.00	-312.24	40.73	0.00
	0.00	0.00	440.59	0.00	-506.68	66.09	0.00
	0.00	0.00	627.52	0.00	-721.65	94.13	0.00
	0.00	0.00	628.30	0.00	-722.55	94.25	0.00
	0.00	0.00	1,585.41	0.00	-1,585.41	0.00	0.00
	-10,244.79	0.00	0.00	0.00	3,848.53	0.00	-6,396.26
TOTAAL	-10,244.79	0.00	3,553.33	0.00	0.00	295.20	-6,396.26

KANTOOR URE

08H00 -15H30 MAANDAG - VRYDAG
PUBLIEKE VAKANSIE DAE UITGESLUIT

BETAALPUNTE

MUNISIPALE KANTORE: GEORGE, UNIONDALE, HAARLEM, POSKANTORE, PICK 'N PAY, SPAR, PEP STORES EN EASY PAY PUNTE LANDWYD.

BOODSKAP

LET ASSEBLIEF DAAROP DAT U REKENINGNOMMER TEN ALLE TYE VERSKAF MOET WORD, INDIEN ENIGE REKENINGNAVRAE, OF DUPLIKAAT REKENINGE VERLANG WORD.

TOTALE BTW	AGTERSTALLIG/ (VOORUITBETAAL)	HUIDIGE	BETAAL DATUM	BEDRAG BETAALBAAR
R295.20	(R6396.26-)	R0.00	15/05/2025	R6396.26-

	TOEKOMSTIGE	HUIDIGE	30 DAE	60 DAE	90 DAE	90 DAE +
MAANDELIKS	0.00	6396.26-	0.00	0.00	0.00	0.00
JAARLIKS	0.00	0.00	0.00	0.00	0.00	0.00
TOTAAL	0.00	6396.26-	0.00	0.00	0.00	0.00

Aandag alle verbruikers

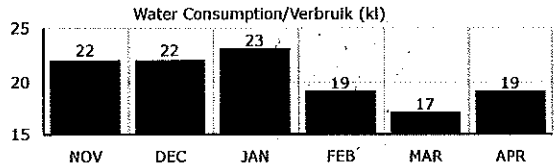
UPDATE YOUR DETAILS HERE

Dit is die verantwoordelikheid van elke verbruiker om navraag te doen by die Munisipaliteit indien geen rekening ontvang was voor die sperdatum nie. Navrae met betrekking tot rekeninge kan soos volg gemaak word:

1)E-pos: Accounts@george.gov.za
2) Telefoon: (044) 801 9111

Dankie.

Water:1401	Cons/Days New		19	31.00		
Water:1401	Basic New		2	147.46	339.16	44.24
Water:1401	0-6 New		12	20.81	287.18	37.46
Water:1401	Free New		12-	20.81	287.18-	37.46-
Water:1401	6-15 New		7	20.81	167.52	21.85
Elec Prepaid Basic	Domestic	01352600165	30	271.51	312.24	40.73



Tp.	Meter Nr.	Vorige	Nuwe Lesing	Faktor	Verbruik	Periode	dag gemid
W	24194108	372	391		19.000	01/03-01/04	.61

Meld en rapporteer foute, betaal munisipale rekeninge, dien self-meterlesings in en nog meer met die My Smart City-toepassing (App). Word deel van die Verbeteringsbeweging saam met George en My Smart City. Verbeter jou stad. Wees deel van verandering. Laai die toepassing (App) nou af!

BETALINGSADVIES

REKENING: GRG 1001593274

AANWYS 0118
REKENINGNOMMER 1001593274

Post Office
BOXER
Pick n Pay
SPAR
ACKERMANS
SHOPRITE
Checkers
Usave
unipay

Smart Water Meter
UniPay
My Smart City

-PEP-
game
WOOLWORTHS

FNB
TAKKODE: 210554
REKENNINGNOMMER: 62869623150
9153 0000 0100 1593 2746