ADOPTION CHECKLIST

ADMISSION NO: MBY 6269

CONTRACT NO: MA 0022

- [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 sterilization Contract Done 30/04/2025
- [x] Copy of Vaccination Record/ Certificate
- [x] Microchip 07/05/25
- [x] Microchip Registration- chip number 992003000548402

Adoptee INFO:

Name & Surname Gys V. Staden

Contact INFO: 0829286142.

Completed by: [signature] Date: 02/05/24

Manager: Evan Date: 02/05/25

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:	ZIGGY		
Pet Registered Name:			
Date of Birth:	01 Jan 1970		
Species:	Canine	Breed:	Rottweiler
Gender:	Male	Sterilised:	Yes
Colour:	BLACK AND TAN		
Markings:			

KUSA

KUSA registered?	No
KUSA Number:	

Microchip Information

Microchip Number:	992003000548402
Dates: Registered:	07 May 2025
Implanted:	30 Apr 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:	GYS VAN STADEN
Email:	53026292@mweb.co.za
Work Phone:	
Home Phone:	
Mobile:	+27 829286142

Address

Address:	9 APIESDORING STR
Suburb:	HEIDERAND
Town/City:	MOSSELBAY
Province:	Western Cape
Country:	South Africa
Area Code:	

Other Contacts

MA0022

9920030005 48402 ADMISSION NO MBY 6269

PRE AND POST HOME INSPECTION FORM DOMESTIC ANIMALS

PASSED: YES / NO DATE UNDERTAKEN: 29/04/25 TIME: 16:30

NAME OF APPLICANT: Gys van Staden

ADDRESS: 9 Apiesdoring, Heiderand.

HOME TEL No: _____ CELL No: 0829286142

ANIMAL(S) ADOPTING: Rottweiler (Meet and great already done)

SEX: Male AGE: ± 6 months

PRE- HOME INSPECTION:

PROPERTY DESCRIPTION			
Type and height of fence: Palasades 1,5 meter		Suitability of fence (i.e. small pets can't escape):	
Suitable shelter? (i.e. Kennel in protected area)	YES ☒ / NO ☐	Any sign of Chain/Runner?	YES ☐ / NO ☒
Is the front yard separated from the back?	YES ☒ / NO ☐	If yes, what partitioning?	
Any hazards? (pool, rubble, razor wire, etc)	YES ☐ / NO ☒	Specify:	
Does applicant live at the address?	YES ☒ / NO ☐	How many animals are on the property?	1

DESCRIPTION OF ANIMALS ON PROPERTY

	1	2	3	4	5
BREED	Jack Russel				
CONDITION	good				
WELFARE (good?)	good				
SEX & AGE	Male/ 4years	/	/	/	/
STERILISED	YES ☒ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐

OTHER INFORMATION / COMMENTS

PROPERTY APPROVED FOR THE FOLLOWING ANIMALS:

- ☑ CATS
- ☐ MEDIUM DOGS
- ☐ SMALL DOGS
- ☑ LARGE DOGS

INSPECTED BY: KK SPCA: Roseldene SIGNATURE: _____

POST HOME INSPECTIONS

DATE	RESULT	REMARK	BY WHOM

DIAGRAM OF PROPERTY ON REVERSE OF THIS PAGE

REPUBLIC OF SOUTH AFRICA
NATIONAL IDENTITY CARD

Surname:
VAN STADEN
Names:
ZACHARIAS ANDRIAS
Sex:
M
Nationality:
RSA
Identity Number:
6708315184087
Date of Birth:
31 AUG 1967
Country of Birth:
RSA
Status:
CITIZEN

Signature:

Mossel Bay
MUNICIPALITY

MOSSEL BAY MUNICIPALITY
MOSSELBAAI MUNISIPALITEIT
UMASIPALA WASEMOSSELBAYI

REKENINGNOMMER:	64-005209-003-3
DATUM VAN REKENING:	23/04/2025
LAASTE KWITANSIE DATUM:	22/04/2025
VOORAFBETAALDE METERNOMMER:	

BTW REG. NO.

Naam:
VAN STADEN ZA & KM

Liggingsadres:
9 APIESDORINGSTRAAT HEIDERAND X12

BELASTING FAKTUUR **MAANDELIKSE REKENING**

DIENSTE DEPOSITO:	ERF NOMMER:	TOTALE WAARDASIE:	WYK No:
2680.00	5209000	1600000	6

DATUM	BESONDERHEDE	BEDRAG

MY OWNER

NAME	GYS VAN STADEN
POSTAL ADDRESS	
STREET ADDRESS	9 APIESDORING
	HEIDERAND
HOME PHONE	
WORK PHONE	
CELLPHONE	0829286142
BREEDER DETAILS	

ME

SPECIES	Canine
BREED	Rottweiler
COLOUR	Black/Brown
SEX	Male
DATE OF BIRTH	24 October
MICROCHIP/TATTOO	992003000548402
FEATURES/MARKS	

NEXT VACCINATION DUE

DATE	DATE	DATE
10/01/2025		
13/02/2025		
Feb 2026		

I WAS VACCINATED ON

DATE	VACCINE AND BATCH NO.	VET SIGNATURE
12/12/2024	Nobivac® 1-DAPPv; 352210 RB; Ser: 02131803C; 07-APR-2024; Exp: 29-OCT-2025	SPCA
13/01/2025	zoetis For Animal Use Only VANGUARD® PLUS 5 Reg.No. G2238 (Act 36/1947) Namibia only: V97/24.1/525 NS2 U.S. Veterinary License No. 190 Canine Distemper-Adenovirus Type 2-Parainfluenza-Parvovirus Vaccine Modified Live Virus 1 Dose; Ser: 723559A; Exp: 30 SEP 25; RABISIN R; Lot/Batch: 4507; F48436; Ul. av./Exp.: 27/04-2026	Spca
13-2-2025 DS	zoetis For Animal Use Only VANGUARD® PLUS 5 Reg.No. G2238 (Act 36/1947) Namibia only: V97/24.1/525 NS2 U.S. Veterinary License No. 190 Canine Distemper-Adenovirus Type 2-Parainfluenza-Parvovirus Vaccine Modified Live Virus 1 Dose; Ser: 723559A; Exp: 30 SEP 25; Boehringer Ingelheim RABISIN R; Lot/Batch: 924507; F48436; Ul. av./Exp.: 27/04-2026	
	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!

Ziggy 626.

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): (ZA) Gys - Staale

HOME ADDRESS: 9 Apiesdoring. Heiderand.

ID NO.: 6708315184087

POSTAL ADDRESS: 9 Apiesdoring Heiderand.

TEL NO (H): (B):

CELL NO: 0829286142 FAX NO:

EMAIL: 53026292@mweb.co.za

Address where animal will be kept: Same above.

Occupation: Self employed.

Do you own or rent your property: own. Do you have consent from owner / Body Corporate? —

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

Reason for wanting animal:

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? Rotti - became lame backlegs

Can you afford private fees? Yes Who is your vet? Mossel Bay Animal Hosp

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

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

Are all your animals sterilised? Give details Yes

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

Which animals do you still have, and what happened to the others? Jack Russel. Died.

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

Full description of the fencing and gate: Fibercreate Height: 6ft

What shelter is provided: OUTDOORS Hok. KENNEL — OTHER —

Have you previously had pets from an SPCA? Yes. Are there children under 10 in your household? —

Pre Home Inspection Fee: 100.00 Receipt No: MBT 6962

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 26/4/25

Backhome

Virbac

MICROCHIPPED ANIMAL REGISTRATION FORM

* COMPULSORY FIELDS
* PRINT INFORMATION

MICRO 992003000548402

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

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.

Cell No. * 082 92 86142

E-mail * 53026292@mweb.co.za

Title * MR Initials * G. Surname * VAN STADEN

Street 9 APIESDORING City

Suburb HEIDERAND Area Code

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 * 30 - 04 - 2025

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

Name of Vet who implanted the Chip BHO SMITH

PET DETAILS

Pet Name ZIGGY Date of birth 2024

Species * CANINE Breed * ROTTWEILER

Colour BLACK + BROWN 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 hereby 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

ADMISSION, ASSESSMENT AND HISTORY RECORD

Loaded

DBV SPCA Garden Route

KENNEL No.	K 22 3B 40			ADMISSION No.	MBY6269	
Stray	Surrender	Abandoned	Returned	Impounded	Confiscated	Request for euthanasia
Date in	17/04/25		Time in	14 57	Date for release	

IDENTIFICATION & LOST AND FOUND			Lost & Found checked	(Yes) No	Lost & Found Date checked	17/04/25
Microchip/Collar or ID tag found	Yes (No)	Date scanned or checked	17/04/25	Microchip or ID Tag number	None	

DESCRIPTION & HISTORY

(Dog)	Cat	Other species (Specify)	B I		
Breed	Rotti	Colour and Markings	Black		
Condition	Fair	Sex	♂	Age	± 6 maande
Temperament	fair	Sterilisation details	No	Name	Ziggy
Coat S. / Tail S / Teeth Condition Fair		Ears	hang	Size	L
Area found / collected from	Ext 23			Date	17/04/25
Reason for surrender					

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	Seimory F. Hermanus			
Residential Address	33 Nicobar Crescent, Extension 23 Mossel Bay, 6505				
Postal Address	Same as Above				
Tel (H) —	Tel (W) 044 303 7200	Cell 0791504030			
Email	[illegible]@gmail.com				
Donation R	Cash	Card	EFT	(Receipt No.)	

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

Claimed ☐ Adopted ☐ Euthanased ☐ Died ☐ Other ☐