

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 14/08/2025
- ☒ Copy of Vaccination Record/ Certificate
- ☒ Microchip
- ☒ Microchip Registration- chip number _____

ADMISSION NO:

MBY7044

CONTRACT NO:

MA0102

Adoptee INFO:

Name & Surname Sunette Bruwer

Contact INFO: 0711051378

01/09/25



992003000548173

Completed by: _____

Date: 29/08/25

Manager: _____

Date: 29/08/25

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.

ANNEXURE A

Additional Household Members & Emergency Contacts

1. Spouse Details

- Full Name: Sunette Bruwer
- Contact Number: 0711051378
- Email Address: bruwersunette@gmail.com

2. Additional Family Member/Friend Details

- Full Name: Rene Bruwer
- Contact Number: 0727067184
- Email Address: rbuwer@gmail.com

3. Previous SPCA Adoption

- Have you previously adopted SPCA? (Yes/No)
- If yes, when? _____
- Where? _____
- What animal did you adopt? _____

1. Adoption Contract Acknowledgment

I, the adoptee, confirm that I have read and fully understand the adoption contract in its entirety.

Signature: Bruwer

Date: 29 August 2025

MICROCHIPPED ANIMAL REGISTRATION FORM

MICROCHIP NUMBER



992003000548173

VET OR WELFARE ORGANISATION

Vet Practice Number *

Vet Practice Name *

Vet Practice Phone - Daytime *

PET OWNER INFORMATION

Cell No. * 0711 051 378

E-mail * bruwersunette@gmail.com

Title * MRS Initials * S

Street Honingklip Farm

Suburb YSTERVARKFONTEIN ROAD

Country

Phone - Day time

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 * BRUWER

City

Area Code ALBERTINIA

Province

Phone - Night time

OTHER CONTACTS

Title * Initials *

Surname *

Cell No. *

Title * Initials *

Surname *

Cell No. *

Title * Initials *

Surname *

Cell No. *

CHIP DETAILS

Registration Date * 01 - 09 - 2025

Date of Implant * 14 - 08 - 2025

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

Name of Vet who implanted the Chip KAX IEVERS

PET DETAILS

Pet Name LEO

Species * FELINE

Colour GINGER

Gender ☒ Male ☐ Female

Date of birth 2025

Breed * OSH

Markings

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

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): ms Sunette Bruwer

HOME ADDRESS: Honingklip farm, Ystervarkfontein Road,

Albertinia ID NO.: 830218 01 00 085

POSTAL ADDRESS: _____

TEL NO (H): _____ (B): _____

CELL NO: 0711051378 FAX NO: _____

EMAIL: bruwer sunette@gmail.com

Address where animal will be kept: Same as above

Occupation: Estate agent

Do you own or rent your property: own Do you have consent from owner / Body Corporate? NO

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

Reason for wanting animal: Just want them as part of the family

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? 2 kittens 1x grey 1x ginger

Can you afford private fees? Yes Who is your vet? Vita vet

How many animals live on the property? DOGS? 2 CATS? _____ OTHERS _____

What are the sexes of your animals? DOGS: Male _____ 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? 23 CATS? _____ OTHER? _____

Which animals do you still have, and what happened to the others? 2, 16 year old passed away

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

Full description of the fencing and gate: fenced, wooden gate Height: 1.8m

What shelter is provided: OUTDOORS _____ KENNEL _____ OTHER Indoors

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: 7900

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 Bruwer Date of application 11/08/2025



992003000548178

PRE AND POST HOME INSPECTION FORM DOMESTIC ANIMALS

ADMISSION NO

MA0102

MBY 6598

MBY 7044

PASSED: YES / NO

DATE UNDERTAKEN: 13/08/25

TIME: 17105

NAME OF APPLICANT: Sunette Bruwer

ADDRESS: Heningklip farm, Ystervarkfontein Road, Albertinia

HOME TEL No:

CELL No: 071105 1378

ANIMAL(S) ADOPTING: 2 kittens

SEX: Male + Female

AGE: 10 weeks

PRE-HOME INSPECTION:

PROPERTY DESCRIPTION

Type and height of fence:	mesh fence	Suitability of fence (i.e. small pets can't escape):	Yes
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?	2

DESCRIPTION OF ANIMALS ON PROPERTY

	1	2	3	4	5
BREED	Pittbull x Boston Terrier				
CONDITION	Good	Good			
WELFARE (good?)	Good	Good			
SEX & AGE	F 1/10	F 1	1	1	1
STERILISED	YES ☒ / NO ☐	YES ☒ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐

OTHER INFORMATION / COMMENTS

Good people, Area very
very open farm.

PROPERTY APPROVED FOR THE FOLLOWING ANIMALS:

☒ CATS☒ MEDIUM DOGS☒ SMALL DOGS☒ LARGE DOGS

INSPECTED BY: Member

SPCA: M. Bay

SIGNATURE:

POST HOME INSPECTIONS

DATE	RESULT	REMARK	BY WHOM

DIAGRAM OF PROPERTY ON REVERSE OF THIS PAGE

GARDEN ROUTE SPCA MOSSELBAY			
DATE	29/01/25	ANIMAL NAME	
KENNEL NUMBER	MBY 7044 CB6	BREED	DSH
CARD NUMBER	MBY 7044	STERILIZED	NO
COLOUR	Ginger	MALE/FEMALE	MALE
VACCINATED	Yes	AGE	± 8 weeks
PROOF OF VACC	Yellow card	STRAY/SURRENDER	Surrendered

GENERAL HEALTH CHECK

			COMMENTS
WEIGHT	0.65 kg		
TEMPERATURE	38.1		
EARS	NAD		
EYES	NAD		
TEETH	NAD		
NOSE	NAD		
LUNGS	NAD		
HEART	NAD		
ABDOMEN	NAD		
HIPS	NAD		
SKIN AND COAT	NAD		
FIT FOR ADOPTION	YES	NO	

ADDITIONAL COMMENTS

I WAS DEWORMED ON

DATE PRODUCT DATE PRODUCT

24/01/25 milpro

Exitel Plus XL
ORANGE FOR DOGS AND CATS
ORANGE FOR DOGS AND CATS

NOTE TO MY OWNER

Regular vaccines as presented by my veterinarian and deworming every 2 weeks for under 12 weeks of age and every 3 months when I'm older are very important for keeping me healthy!

RABIES MOVEMENT PERMIT

This certificate also serves as a movement permit for this animal within the Republic of South Africa on condition that:
1. It accompanies the animal;
2. Property of origin is free from quarantine restrictions imposed for rabies control purposes;
3. The rabies vaccine immunity is valid;
4. The certificate was signed in the space below to confirm that the condition in 2 and 3 were met before the intended movement.

DATE

BY VETERINARIAN

SIGNATURE

PRACTICE STAMP

CERTIFICATE OF STERILISATION

VETERINARIAN'S SIGNATURE

DATE

DOCTOR'S NAME

14/08/2025
Dr AS Mkhulu

Garden Route SPCA
PO BOX 236
GARDEN ROUTE
P.O. BOX 236
GARDEN ROUTE
P.O. BOX 236
GARDEN ROUTE
P.O. BOX 236

PRACTICE STAMP

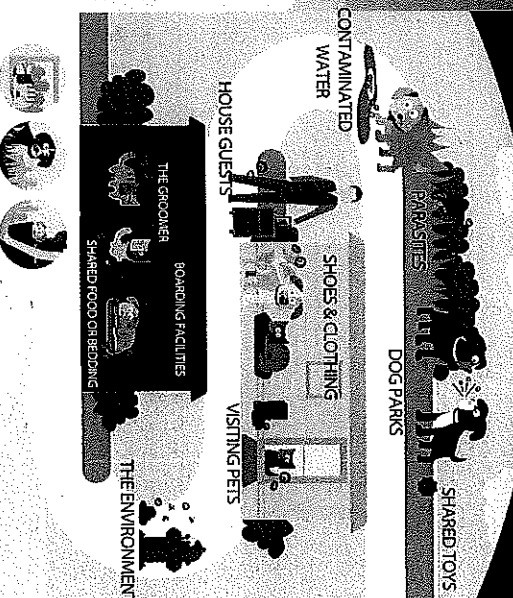


Animal Health

Intervet South Africa (Pty) Ltd, Reg. No. 1991/006580/07
20 Spartan Road, Spartan, 1619, RSA | Private Bag X2026, Isando, 1600, RSA
Tel: +2711 923 9300, Fax: +2711 392 3158, Sales Fax: 086 603 1777
www.msdd-animal-health.co.za ZA-NDV-21720001

VACCINE RECORD CARD

Vaccination protects your pet against
DANGEROUS GERMS
that can be everywhere.



PET'S NAME

MY VET

GARDEN ROUTE SPCA

MOSSSEL BAY

18 BILL JEFFERY AVE
KWANONQABA

044 693 0824

072 287 1761

theatrem@gjrspca.co.za

Consulting Hours

Monday and Friday: 09:00-16:00

Wednesday: Closed

Tuesday and Thursday: 09:00-16:00

Saturday: 09:00 - 11:00

Farm Honingklip

Albertinia

6695

22 August 2023

To whom it may concern

We, the undersigned directors of Piscador Agricultural Cooperative LTD, hereby confirm that Sunette Bruwer, ID 830218 0100 085, currently resides on the property owned by Piscador Agricultural Cooperative LTD 2021/600475/24.



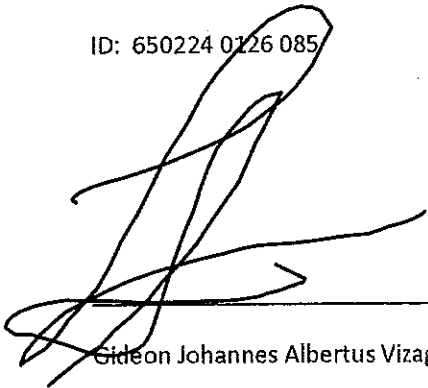
Elsie Catharina Jansen van Vuuren

ID: 650224 0126 085



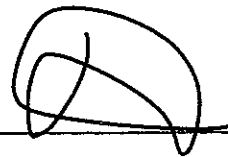
Willem Abraham Jacobus Bester

ID: 680810 5044 084



Gideon Johannes Albertus Vizagie

ID: 610310 5119 081



Louisa Coetzer

ID: 700206 0175 089

ADMISSION, ASSESSMENT AND HISTORY RECORD



Garden Route

KENNEL No. <u>CB6 CB C3</u>				ADMISSION No. <u>MBY7044</u>		
Stray	<u>Surrender</u>	Abandoned	Returned	Impounded	Confiscated	Request for euthanasia
Date in	<u>25/07/25</u>		Time in	<u>09:00</u>	Date for release	

IDENTIFICATION & LOST AND FOUND			Lost & Found checked	☒ Yes ☐ No	Lost & Found Date checked	<u>25/07/25</u>
Microchip/Collar or ID tag found	☒ Yes ☐ No	Date scanned or checked	<u>25/07/25</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>7 weeks</u>
	Temperament	<u>Good</u>	Sterilisation details	<u>NO</u>	Name	
	Coat <u>short</u>	Tail <u>long</u>	Teeth Condition	<u>Fair</u>	Ears	<u>up</u>
	Area found / collected from	<u>Collected mom for steri, kittens surrendered</u>				
	Date	<u>25/07/25</u>				
	Reason for surrender	<u>Came in on 17/07/25, mom was sterilized.</u>				

ASSESSMENT		Surrendered by		☒ Name	<u>Lynette Steyn</u>
GOOD WITH: Yes No		Found by			
Children	☐	Residential Address		<u>20 Skool Straat</u>	
Cats	☐			<u>D'Almeida</u>	
Other Dogs	☐	Postal Address		<u>N/A</u>	
Livestock/Other	☐	Tel (H)		<u>N/A</u>	Tel (W) <u>N/A</u>
DO THEY: Yes No		Cell		<u>072234 8853</u>	
Jump Fences	☐	Email		<u>N/A</u>	
Run Away	☐	Donation R		<u>N/A</u>	Cash Card EFT (Receipt No.) <u>N/A</u>
COMMENTS:					

PLEASE INSIST ON A RECEIPT

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

STATEMENT OF SURRENDER

I do hereby certify that DO NOT own the animal/s described above, that it is IT IS NOT a stray and 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 <u>Refer to MBY 2814</u>	Witness for Society
FOR OFFICE USE: PENDING ADOPTION	
Details of first Applicant	Details of second Applicant
Details of third Applicant	