

ADOPTION CHECKLIST

ADMISSION NO:

MBY 9902

CONTRACT NO:

MA0216



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 19/02/2026



Copy of Vaccination Record/ Certificate



Microchip



Microchip Registration- chip number _____

Adoptee INFO:

Name & Surname Alet Jonker

Contact INFO: 079 8456518

10/03/26



Completed by: _____

Date: 20/02/26

Manager: _____

Date: 20/02/26

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

* COMPULSORY FIELDS

* PRINT INFORMATION



992003000579353

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. * 0798456518

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

E-mail * aletjonker@icloud.com

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

Title * MRS Initials * A

Surname * Jonker

Street 24 Status Rylaan

City

Suburb Deouille Park

Area Code Haverbos

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 * 10 - 03 - 2026

Date of Implant * 20 - 02 - 2026

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

Name of Vet who implanted the Chip KA

PET DETAILS

Pet Name

ANSMARI

Date of birth

Species * CANINE

Breed * POMERANIAN

Colour 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 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 Virbac RSA (Ltd) Pty for the above-mentioned purposes. SIGNATURE

REGISTRATION PROCESS - Please use one of the following options 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@virbac.co.za
4. By App Download the Virbac Backhome Africa App www.backhome.co.za • Tel: 011 852-8120 or 011 027 8837 • Fax: 0800 222 546

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/Ms (including initials): Alet Jonker

HOME ADDRESS: 24 Status Rylaan, Deoville Park, Hartenbos

ID NO.: 7903180004085

POSTAL ADDRESS: N/A

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

CELL NO: 0798456518 FAX NO: N/A

EMAIL: aletjonker@icloud.com

Address where animal will be kept: AS ABOVE

Occupation: Teacher - Teneo Online School

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

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

Reason for wanting animal: We are finally ready to bring a dog into our 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? Yorkie / Toy Pom / Pug / Shih Tzu

Can you afford private fees? Ja Who is your vet? Hartenbos Animal Hospital

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

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

Are all your animals sterilised? Give details Have none

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

Which animals do you still have, and what happened to the others? NONE

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

Full description of the fencing and gate: WALL Height: 1.8 M

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: 9069

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 09/02/2026

Eiendom wat verhuur word: _____

Straat: _____ Dorp: _____

Erfnommer: 12324 Kragmeter nr: _____

Eiendom het 'n motorhuis JA, NEE _____

1. HUURTERMYN:

Die huurtydperk sal vir 12 (12)maande wees, met die ingang van

1-9-2011 tot 30-8-11. Indien die huurder as gevolg van omstandighede moet verhuis, kan hy twee kalendermaande kennis gee. Indien die huurder twee kalendermaande kennis gee en 'n alternatiewe goedgekeurde huurder gevind word om die kontrak oor te neem direk nadat huurder verhuis, kan hy vrygeskeld word van die penalisasiebedrag aan die eienaar.

Indien die kontrak voortydig beëindig word sal 'n penalisasieboete intree van 10% van die maandelikse huur vir die oorblywende tydperk van die kontrak in die guns van die eienaar. Laasgenoemde geld steeds ten spyte van 2nde kennis. Indien daar nie 'n goedgekeurde huurder gevind word vir maand twee nie, is die huurder steeds verantwoordelik vir maand twee se huur. Die penalisasiebedrag aan eienaar sal betaalbaar wees indien daar nie na die twee maande 'n goedgekeurde huurder geplaas kon word nie. 'n Eienaar kan nie 'n huurder kennis gee tensy die huurooreenkoms nie nagekom word nie.

Indien die huurder nie die eiendom vir die volle termyn van die kontrak huur nie is hy verantwoordelik vir 'n boete van R2500.00 vir kontrakbreek met die agentskap, al word 'n afloshuurder in die eiendom geneem. Agentskap moet dan weer tyd aan 'n nuwe keuringsproses afstaan. Die ooreenkoms met die agent is vir twaalf maande. Huurder is verantwoordelik vir die bankfooie indien hul kontant inbetaal.

Indien die huurder of eienaar nie self die kontrak kan teken vir welke rede n mag hy skriftelik tekenmag gee vir 'n persoon om namens hom te teken. Di tekenmag moet die huurkontrak vergesel met 'n afskrif van die persoon wa kontrak gaan teken se identiteitsdokument.

HURDER 1

HURDER 2

Geteken te u op die dag van _____ 2024.

VERHURDER 1

VERHURDER 2

Geteken te _____ op die dag van _____ 2024.

e
Sanette Jensen

SANTE EIENDOMME (Prinsipaal)

Adoption

loaded



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ADMISSION NO

MBY 9902

PRE AND POST HOME INSPECTION FORM DOMESTIC ANIMALS

PASSED: ☒ YES ☐ NO

DATE UNDERTAKEN: 17/02/26

TIME: 13:39

NAME OF APPLICANT: Alet Jonker

ADDRESS: 24 Status Rylaan, Deuvill Park, Hanmerbos

HOME TEL. No: CELL No: 0798456518

ANIMAL(S) ADOPTING: Pomeranian

SEX: Female AGE: 2 yrs

PRE- HOME INSPECTION:

PROPERTY DESCRIPTION			
Type and height of fence: Wall bricks 2m high	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?	

DESCRIPTION OF ANIMALS ON PROPERTY					
	1	2	3	4	5
BREED					
CONDITION					
WELFARE (good?)					
SEX & AGE	/ 1st	/	/	/	/
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: Kurr

SPCA: M. S. S. / by

SIGNATURE: [Signature]

POST HOME INSPECTIONS

DATE	RESULT	REMARK	BY WHOM

DIAGRAM OF PROPERTY ON REVERSE OF THIS PAGE

MY OWNER

Alec Janker

ADDRESS

24 Status Rybaan

Oceville Park, Haverbos

PHONE

PHONE

0798456518

REGISTER DETAILS

ME

Canine
Pomeranian

Black

Female

15/07/24



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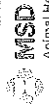
NEXT VACCINATION DUE

DATE DATE DATE

28/09/24 (11/2m)

02/11/24

17/01/25



MSD



Nobivac

I WAS VACCINATED ON

DATE VACCINE AND BATCH NO. VET SIGNATURE

19/12/24
8/12/24

8/10/24

10/12/24
06/02/26

4.4 kg

Nobivac DHPPI
Batch: 1993
Exp: 2025

For Adult Use Only
VANGUARD PLUS 5
Contains one (1) 100mg tablet of
Praziquantel (isiquinolone) 50 mg/ml
U.S. Veterinary License No. 119

For Adult Use Only
VANGUARD PLUS 5
Contains one (1) 100mg tablet of
Praziquantel (isiquinolone) 50 mg/ml
U.S. Veterinary License No. 119

For Adult Use Only
RABISIN R
Contains one (1) 100mg tablet of
Rabies Vaccine (inactivated)
U.S. Veterinary License No. 119

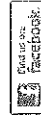
For Adult Use Only
RABISIN R
Contains one (1) 100mg tablet of
Rabies Vaccine (inactivated)
U.S. Veterinary License No. 119

I WAS VACCINATED ON

DATE VACCINE AND BATCH NO. VET SIGNATURE

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 of life, but it's up to you to keep my vaccinations up to date as advised by my vet.

Nobivac[®] DHPPI (Reg. No. G2377 Act 36/1947), Nobivac[®] KC (Reg. No. G2804 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. G2717 Act 36/1947) Contains Praziquantel (isiquinolone) 50 mg/ml and Fenbendazole (benzimidazole) 500 mg/tablet. Exitel Plus (Reg. No. G4226 Act 36/1947) Contains Praziquantel 50 mg, Pyrantel 175 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.



Exitel Plus
Exitel Plus XL



facebook.com/BravectoSouthAfrica
facebook.com/MSDPetsSa

ADMISSION, ASSESSMENT AND HISTORY RECORD



Garden Route

KENNEL No. <u>KBA 284 37</u>				ADMISSION No. <u>MBY9902</u>		
Stray	Surrender	Abandoned	Returned	Impounded	Confiscated	Request for euthanasia
Date in	<u>06/02/26</u>		Time in		Date for release	

IDENTIFICATION & LOST AND FOUND			Lost & Found checked	☒ Yes ☐ No	Lost & Found Date checked	<u>06/02/26</u>
Microchip/Collar or ID tag found	☒ Yes ☐ No	Date scanned or checked	<u>06/02/26</u>	Microchip or ID Tag number	<u>None</u>	

DESCRIPTION & HISTORY	Dog	Cat	Other species (Specify) <u>B/I</u>			
	Breed	<u>to Pommeranian</u>	Colour and Markings <u>Black</u>			
	Condition	<u>Fair</u>	Sex	<u>♀</u>	Age <u>2 years</u>	
	Temperament	<u>friendly</u>	Sterilisation details	<u>NO</u>	Name <u>Kotg</u>	
	Coat <u>L</u>	Tail <u>L</u>	Teeth Condition <u>Fair</u>	Ears <u>UP</u>	Size <u>S</u>	
	Area found / collected from <u>Hartland (Hartlaub)</u>					Date <u>06/02/26</u>
	Reason for surrender <u>Due to health condition</u>					

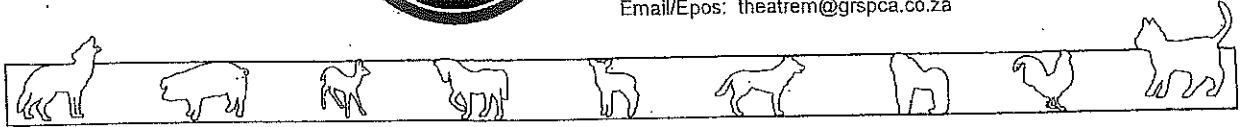
ASSESSMENT		Surrendered by		Name		<u>Tatun Fox</u>
GOOD WITH:		Found by				
Children	☐	Residential Address		<u>35 Bitterbos Street</u>		
Cats	☐	Postal Address		<u>Hartland Estate</u>		
Other Dogs	☐	Tel (H) <u>06 1111 1111</u>		Tel (W) <u>06 1111 1111</u>	Cell <u>076 862 4337</u>	
Livestock/Other	☐	Email		<u>tatun.kirby@gmail.com</u>		
DO THEY:	☐	Donation R <u>N/A</u>		Cash	Card	EFT
Jump Fences	☐			(Receipt No.) <u>N/A</u>		
Run Away	☐					

PLEASE INSIST ON A RECEIPT

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

STATEMENT OF SURRENDER	
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 hierdie dier/e hierbo beskryf BESIT / NIE BESIT NIE, dat dit 'n RONDLOPER (NIE RONDLOPER NIE) is, en dat ek WEEET / NIE WEEET 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>[Signature]</u>	Witness for Society <u>[Signature]</u>
FOR OFFICE USE: PENDING ADOPTION	Details of second Applicant
Details of first Applicant	Details of third Applicant

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



Caring for your Pet after Surgery

Today your pet underwent a surgical procedure under sedation / general anaesthesia. Once your pet is out of the operating room, awake and walking and on its way home, it's up to you to help it feel more comfortable so the healing process can begin. Here's what you need to know.

We're Home! Now What?

Rest: In general it's common for most pets to be sleepy / lethargic or unsteady on their feet for the first 12-24 hours after surgery. That's why it's important to let them rest and recover in a quiet place at first, only allowing them outdoors to relieve themselves.

Food: Supervise your pet's eating and drinking by providing food and water in small amounts for the first 24 hours.

Activity: Restrict their activity to some extent. If they move too much following surgery there is the risk of the cut tissues not bonding properly which can lead to wounds that don't heal or heal too slowly.

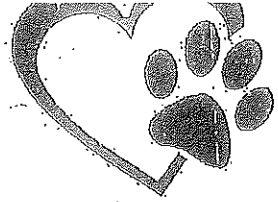
Surgical site(s): Some swelling is normal after surgery, but watch for any signs of a smelly discharge, heat, pain or excessive bruising. When it comes to the surgical incision itself, the best course of action is to leave it alone. However, if you notice the site getting very dirty or crusty you can clean it gently with a towel and warm water, but stay away from alcohol (spirits) or peroxide which can cause pain and delay healing. And try to keep your pet from scratching or chewing at the sutures. It may mean bandaging the site or applying an Elizabethan collar (a.k.a Buster collar).

Sutures: In most cases sutures can be removed after 14 days (unless they are self-dissolving sutures), by which time the wound should have knitted and be visibly clean and dry. This can be done at home by yourself or your pet returned to us. In some cases violet absorbable sutures are used in which case they obviously don't have to be removed. Enquire from your veterinarian or sister.

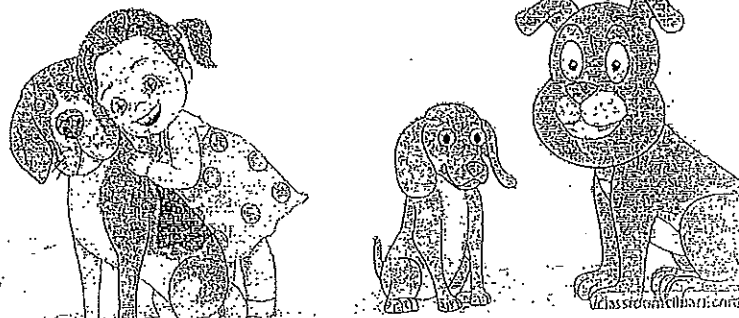
Things to watch out for and phone us immediately when noticed:

- Excessive swelling or bleeding from the wound
- Suture removal and opening of the wound
- Vomiting or bloat

THANK YOU FOR ADOPTING ME!



I am in a new environment with different smells, people and four legged friends all around me. I have just travelled in a car to my new home. It was so cool! I need you to understand that it will take time for me to settle into the new environment and get used to my new fur friends at my new home. I may be a bit nervous or edgy, as I may have been treated badly in the past. The society could only give you information that they were aware of. I ask that you be patient with me and teach me right from wrong. Ask a dog/cat behaviourist with regards to any concerns you may have regarding my temperament or behaviour. Please provide me with the proper training/puppy classes to ensure that I am always on my best behaviour. If I am a puppy, and chew up your shoes, know that I most probably did not have toys at my previous home and my gums may be itching. If I bully the other dog at home or chase the cat, know that I never had friends and this is truly an exciting experience for me. The integration process of being in a new environment, around new people as well as the other pets at home can take up to 2-3 months. Allow me a fair chance to adjust in my new home and always keep my best interest at heart. THANK YOU for changing my life by adopting me.



ANNEXURE A

Additional Household Members & Emergency Contacts

1. Spouse Details

- Full Name: Ansmari Elizabeth Jonker.
- Contact Number: 076 231 7879.
- Email Address: jjonker@gmail.com.

2. Additional Family Member/Friend Details

- Full Name: _____
- Contact Number: _____
- Email Address: _____

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: _____

Date: _____