

ADOPTION CHECKLIST

ADT-SC# NO:

10160

MBY ~~9444~~

CONTRACT NO:

MA0261



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 end April



Copy of Vaccination Record/ Certificate



Microchip



Microchip Registration- chip number



992003000579334

Completed by:

[Signature]

Date: 25/03/26

Manager:

[Signature]

Date: 25/03/26

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.



PRE AND POST HOME INSPECTION FORM DOMESTIC ANIMALS

992003000579334

ADMISSION NO

MB1 10160

PASSED: ☒ YES / ☐ NO

DATE UNDERTAKEN: 24-7-26 TIME: 18:00

NAME OF APPLICANT: Mariaga Kruger

ADDRESS: 33 Kierichout Straat, Hartenbos heideveld

HOME TEL No:

CELL No: 083 2699148

ANIMAL(S) ADOPTING: Tabby cat

SEX: Male

AGE: 10 weeks

PRE-HOME INSPECTION:

PROPERTY DESCRIPTION

Type and height of fence:	Steel 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?	gate
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?	0

DESCRIPTION OF ANIMALS ON PROPERTY

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

OTHER INFORMATION / COMMENTS

PROPERTY APPROVED FOR THE FOLLOWING ANIMALS:

☐ CATS☐ SMALL DOGS☐ MEDIUM DOGS☐ LARGE DOGS

INSPECTED BY: [Signature]

SPCA:

Mossie [Signature]

SIGNATURE: [Signature]

POST HOME INSPECTIONS

DATE	RESULT	REMARK	BY WHOM

DIAGRAM OF PROPERTY ON REVERSE OF THIS PAGE

ADMISSION No.
TOELATINGSNR.

MA0251



ADOPTION CONTRACT



UITPLASINGSKONTRAK

Garden Route

DOG / CAT	Breed	Male/Female
Micro	992003000579334	

This ar. 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.

- I do hereby confirm and undertake that:
- I am over eighteen (18) years of age.
- All family members agree to the adoption and will abide by the conditions in the contract.
- 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.
- I will give the animal a fair chance to adjust to its new home.
- I understand that donations are not refundable or transferable.
- I will feed and house the animal to the Society's satisfaction.
- 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.
- I can afford the services of a private veterinary practitioner.
- I will ensure that vaccinations are kept up to date and in the case of injury or illness professional veterinary treatment will be provided.
- I understand that in 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.
- I will ensure that the animal is sterilised as stipulated by the Society.
- I undertake to ensure that the animal has identification at all times, either in form of a microchip or a collar and tag - only elasticated or quick release collars may be used for cats.
- My property is adequately enclosed and at no time shall I knowingly allow my dog to roam the streets.
- I will notify the Society within forty-eight (48) hours should the animal die or go missing.
- I know and understand the "By-Laws pertaining to animals" of the Municipality in which I reside.
- I will permit an authorised officer of 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.
- I will not use or allow the animal to be used as a watchdog on any industrial or commercial premises.
- I will notify the Society of any change of address in writing by registered post with 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.

Garden Route

HOND / KAT	Ras	Manlik/Vroulik
Mikroskyfie en of ID nSkyfie Nommer:		

Hierdie dier is aan u oorhandig met die vertroue dat u die dier 'n goeie tuiste sal bied met verantwoordelike en liefdevolle sorg. Eienaarskap van 'n dier gee baie plezier en tevredenheid. Daar is ook verantwoordelikhede en verpligtinge wat nagekom moet word. Die feit dat hierdie dier in ons sorg was, dui gewoonlik daarop dat iemand hulle plig versuim het.

- Ek onderneem en bevestig dat:
- Ek ouer as agtien (18) jaar is.
- Alle familieleden stem saam oor die aanneming en sal al die voorwaardes in die kontrak nakom.
- Indien ek om enige rede nie langer die dier kan versorg nie, onderneem ek om dit alleenlik aan die DBV terug te besorg. As ek om enige rede nie daartoe in staat is om die dier te hou nie sal ek nie besit van die dier afstaan nie tensy ek dit aan die DBV terugbesorg. Ingeval ek nie so optree nie, aanvaar ek aanspreeklikheid om alle onkoste aan die DBV te betaal wat hulle mag aangaan in die verkryging van bevestiging dat die dier by 'n geskikte persoon met aanvaarbare huis en erf gehuisves is. Ingeval dit nie die geval is nie, aanvaar ek ook aanspreeklikheid vir alle onkoste wat die DBV mag aangaan, insluitende die regskoste volgens 'n prokureur en klient skaal, in die terugbesorging van die dier.
- Ek sal die dier 'n redelike kans gee om aan sy nuwe tuiste gewoon te raak.
- Ek begryp dat donasies nie oordraagbaar is of terugbetaal word nie.
- Ek onderneem om die dier te versorg en te huisves na die Vereniging se tevredenheid.
- Ek sal nie die dier vasketting of gehok hou nie, en aanvaar dat indien die dier wel in my besit vasgeketter of gehok gevind word, die Vereniging dit dadelik sal verwyder.
- Ek kan die dienste van 'n private veeartsnykundige bekostig.
- Ek onderneem om die dier se nodige inentings op datum te hou en in die geval van siekte of beserings sal ek 'n veearts se dienste gebruik.
- Ek verstaan dat, indien die dier siek word (beserings uitgesluit), binne sewe (7) dae van aanneming, ek die dier na die Vereniging mag bring vir behandeling deur sy veearts sonder enige koste (volgens die Vereniging se diskresie).
- Ek onderneem om toe te sien dat die dier gesteriliseer word soos deur die Vereniging voorgeskryf.
- Ek onderneem om my dier te identifiseer ter alle tye met behulp van 'n mikroskyfie of halsband en naamplaatjie - slegs rekbandjies mag vir katte gebruik word.
- My erf is behoorlik omhein en ek sal nie toelaat dat my hond in die straat rondloop nie.
- Ek sal binne agt-en-veertig (48) uur die Vereniging in kennis stel indien die dier sterf of verlore raak.
- Ek verstaan en ken die "By-wette aangaande diere" van die Munisipaliteit waarin ek woonagtig is.
- Ek sal toelaat dat 'n gemagtigde persoon van die Vereniging my erf kan besoek van tyd tot tyd, om te verseker dat die dier wel versorg word soos in die Uitplasingsbeleid uiteengesit. Ek sal toelaat dat die Vereniging die dier in besit neem indien die voorwaardes en reëls van hierdie beleid nie redelik nagekom word nie.
- Ek sal nie die dier gebruik of toelaat dat die dier as 'n waghond gebruik word op enige industriële of kommersiële perseel nie.
- Ek sal die Vereniging binne sewe (7) dae per geregistreerde pos in kennis stel van enige verandering van adres

* Ek onderneem om nooit die dier wat ek aanneem te mishandel verwaarloos of te verlaat nie.
* Ek verklaar hiermee dat ek nog nooit skuldig bevind of aangekla is van wreedheid of verwaarloosing van enige dier nie.

Ek verklaar hiermee dat ek die Uitplasing Kontrak gelees het, en dat ek bevestig en erken dat die kontrak wettig en bindend is.

ADOPTER NAME - Prof/Dr/Mr/Mrs/Ms (Including initials)
NAAM - Prof/Dr/Mnr/Mvr/Maj (Insluitende voorletters):

HOME ADDRESS
WOONADRES: 33 Kieriebaaistraat

TEL No (H): Hartenbos Heuwels, Hartenbos
TELEFOON Nr (H):

CELL No:
SELFOON Nr: 083 2699148

E-MAIL: fhartenbos@pnp.co.za
E-POS:

ADOPTION FEE: R850
AANEMINGSVOOI:

VEHICLE REG No. CBS 2215
VOERTUIG REG Nr:

SIGNATURE
HANDTEKENING: Kruger

DATE / DATUM: 26/03/2026

ID/PASSPORT No.:
ID/PASPOORT Nr: 7209050155084

(B):
(W):

FAX No:
FAKS Nr:

DONATION:
DONASIE: KWITANSIE Nr 9027
RECEIPT No.

VEHICLE MAKE: Landcruiser
VOERTUIG MAAK: COLOUR: Khaki
KLEUR:

WITNESS FOR SOCIETY:
GETUIE VIR VEREENIGING



MOSSSEL BAY MUNICIPALITY
MOSSSELBAAI MUNISIPALITEIT
UMASIPALA WASEMOSSSELBAYI

BTW REG. NO.

Naam:

KRUGER M

Liggingsadres:

33 KERIEHOOTSTRAAT HARTENSOHEUWELS

BELASTING FAKTIUUR MAANDELIKE REKENING

REKENINGNUMMER:	43-002877-009-2
DATUM VAN REKENING:	23/03/2026
LAASTE KWITANSIE DATUM:	22/03/2026
VOORAFBETAALDE METERNUMMER:	01081467563

DENSTE DEPOSITO:	650.00	ERF NUMMER:	2877000	0	WYK Nr:	7
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DATUM	BESONDERHEDE	BEDRAG
20/03/2026	BALANS OORGEERING 01081467563ELEKTRISITEIT	1282.91
	BASIES	431.91
	VAT/BTW	64.78
20/03/2026	WATER 21/01/2026-18/02/2026 4650 - 4661 (11 Kl 28 Dae)	363.80
	BASIES	261.39
	07/25	5.52 @ 0.000 = 0.00
		5.48 @ 10.030 = 54.96
	VAT/BTW	47.45
20/03/2026	VULLIS	320.62
	KWITANSIES	1282.00
	Balans Oorgesdra	0.02
	BTW OP 'S' ITEMS:	154.05
	ACB TOT:	0.00

KREDIET	60 DAE	30 DAE	LOPEND	BEDRAG
0.00	0.00	0.00	1182.02	1182.00
Betalings moet voor of op die vervalddatum gemaak word				BEDRAG BETAALBAAR
15/04/2026				1182.00

Vou en skuur af.



P4010395

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 Besonderehede

PREDEFINED BENEFICIARY.
MOSSSEL BAY MUNICIPALITY
REF NO. 430028770092



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



43-002877-009-2

Fold and tear on perforation.

IF UNDELIVERED PLEASE RETURN TO: Private Bag X 29, Mossel Bay, 6500



REPUBLIC OF SOUTH AFRICA
NATIONAL IDENTITY CARD

Surname:
KRUGER
Names:
MARIANA
Sex:
F
Nationality:
RSA
Identity Number:
7209050155094
Date of Birth:
05 SEP 1972
Country of Birth:
RSA
Status:
CITIZEN



Conditions:

Date of Issue:
08 DEC 2024

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 60 11 60

126246697



ANNEXURE A

Additional Household Members & Emergency Contacts

1. Spouse Details

- Full Name: Gert Kruger
- Contact Number: 083 457 3441
- Email Address: flourenb05@pnp.co.za

2. Additional Family Member/Friend Details

- Full Name: Zanele / Heinrich
- Contact Number: 079 713 1684 083 263 4526
- Email Address: heinnichkruger@pnp.co.za

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: 26.03.2026



992003000579334

Vet Practice Number *

Vet Practice Name *

Vet Practice Street Address *

Cell No. * 0832699148

E-mail * f.hartenbos@pnp.co.za

Title * MRS

Initials * M

Surname * KRUGER

Street 33 KLERIEHOUT

City

Suburb

Area Code HARTENBOS

Country

Province

Phone - Day time

Phone - Night time

Title *

Initials *

Surname *

Cell No. *

Title *

Initials *

Surname *

Cell No. *

Title *

Initials *

Surname *

Cell No. *

Registration Date *

Date of Implant * 26 - 03 - 2006

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

Name of Vet who implanted the Chip KAY LEJERS

Pet Name LOKI

Date of birth

Species * FELINE

Breed * DSH

Colour TABBY

Markings

Gender ☒ Male ☐ Female

Sterilised

Yes

☒Are you a KUSA Registered Member? ☐ Yes ☐ No

Medical Conditions

KUSA Registration Number

Medical Insurance Company

Pet Registered Name

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 his personal information for marketing purposes and unless expressly stated otherwise hereby consents to its personal information being used by _____ and Virbac RSA (ptd) Pty for the above-mentioned purposes. SIGNATURE

1 On-line

Log onto www.backhome.co.za. Complete the registration process.

2 By fax

Fax this completed form to Back Home on 011 222 546 (TOLL FREE) or 011 852 6364

3 By e-mail

Scan and E-mail the completed form to backhome@virbac.co.za or backhome@pnp.co.za

4 By App

Download the Index Backhome Africa App

www.backhome.co.za • Tel: 011 852-5320 or pr 011 827 8837 • Fax: 0800 222 546



STERILISATION CONTRACT

PLEASE READ CAREFULLY - THIS IS A LEGAL DOCUMENT

CONTRACT No. MA 0251

DATE: 26/03/26

between Mosselbay SPCA

and

7209056155084
f.hartenbos@nnp.co.za

Name Mariaan Kruger

Address 33 Kieriehoutstraat, Hartenbos Heuwels

Telephone Numbers (H) 083 2699148 (B) _____

to have spayed / neutered / vasectomised (delete whichever is not applicable):

Animal's Name _____ Sex Male Age 10 weeks

Description ~~Black~~ Ginger

On (due date) End April Adoption Form No. MA 0251

on the understanding that you will arrange to have this done at the Mosselbay SPCA Veterinary Hospital.

1. Should the animal be taken to another Veterinary Hospital or Clinic for this surgical procedure without the written authorisation of this Society, the owner will be responsible for the payment of any fees incurred.
2. If the animal is not sterilised on the due date mentioned above, the Society **reserves the right to confiscate** the animal and **NO MONEY WILL BE REFUNDED**. The owner agrees that a member of the SPCA's staff may enter upon their premises in order to remove and/or inspect the animal.
3. This animal cannot be passed on to a new owner. The original sterilisation contract will be cancelled and a new one issued in the new owner's name free of charge.
4. In the event of the animal's death, proof must be submitted to the Society within seven (7) days.
5. The owner undertakes to bring the section 1 above to the attention of the Veterinary Practitioner who may, or will be, consulted by the owner.

I have read and fully understand the conditions above, which I accept unconditionally.

Signature of new Owner: *[Signature]* For SPCA: *[Signature]*

CONFIRMATION OF STERILISATION:

Vet: _____ Signed: _____

Date: _____

IT WAS A HUMAN AFFAIR

Kruger

18/07/26

33 Kievihera + Staat

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© 1997 NABIVAC, INC. Cat. # 4 DAPPV/Dec No. G3892 Act 3/6/97 Nabivac® Feline-HCP (Reg. No.

Nobivac® DHPII (Reg. No. G2377 Act 36/1947), Nobivac® KC (Reg. No. G2604 Act 36/1947), Nobivac® Canine-1 DAP-V (Reg. No. G2682 Act 36/1947), Nobivac® Canine-1 DAP-FV (Reg. No. G2683 Act 36/1947), Nobivax® Rabies (Reg. No. G2207 Act 36/1947), Quantel® Tablets (Reg. No. G2717 (Act 36/1947) Contains

Praziquantel (isiconline) 50 mg/tablet and Fenbendazole (benzimidazole) 500 mg/tablet, Exitel Plus (Reg. No. G4226 Ad. 36/1947). Contains Praziquantel 50 mg, Pyrantel 50 mg (equivalent to 504 mg pyrantel embonate) and Fenbendazole 500 mg (Reg. No. G4226 Ad. 36/1947).

antel 150 mg. Exitel Plus XL (Reg. No. G422/ Act 36/1947) Contains Flaziquantel 150 mg, yomec 10 mg (equivalent to 10 mg of yomec base) and 25 mg of Fluralaner per kg body weight.

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1. The first part of the document is a header section containing the following information:

- Page number: 1
- Date: 10/10/2010
- Time: 10:10
- Author: [Name]
- Subject: [Subject]

2. The second part of the document is a table with the following structure:

Item	Description	Value
1	Item 1	100
2	Item 2	200
3	Item 3	300
4	Item 4	400
5	Item 5	500
6	Item 6	600
7	Item 7	700
8	Item 8	800
9	Item 9	900
10	Item 10	1000

3. The third part of the document is a text section containing the following information:

The total value of the items is 5500.

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ADMISSION, ASSESSMENT AND HISTORY RECORD



Garden Route

KENNEL No. <u>CB4 CB5 c 3</u>		ADMISSION No. <u>MBY10160</u>			
Stray	<u>Surrender</u>	Abandoned	Returned	Impounded	Confiscated
Date in <u>19/02/16</u>			Time in		Date for release
Request for euthanasia					

IDENTIFICATION & LOST AND FOUND		Lost & Found checked	☒ Yes ☐ No	Lost & Found Date checked	<u>19/02/16</u>
Microchip/Collar or ID tag found	☒ Yes ☐ No	Date scanned or checked	<u>19/02/16</u>	Microchip or ID Tag number	<u>NONE</u>

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>♂</u>	Age <u>Kitten</u>	
	Temperament	<u>Friendly</u>	Sterilisation details <u>no</u>	Name	
	Coat <u>S</u>	Tail <u>L</u>	Teeth Condition <u>Fair</u>	Ears <u>UP</u>	Size <u>S</u>
	Area found / collected from <u>Asia</u>				Date <u>19/02/16</u>
	Reason for surrender <u>can't afford to feed cats</u>				

ASSESSMENT		Surrendered by		Name	
GOOD WITH:		Found by		<u>Linda Withales</u>	
Children	☐	Residential Address		<u>33 ...</u>	
Cats	☐			<u>Asia</u>	
Other Dogs	☐	Postal Address		<u>N/A</u>	
Livestock/Other	☐	Tel (H) <u>N/A</u>		Tel (W) <u>N/A</u>	Cell <u>N/A</u>
DO THEY:	☐	Email		<u>N/A</u>	
Jump Fences	☐	Donation R <u>N/A</u>		Cash	Card
Run Away	☐			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

STATEMENT OF SURRENDER

I do hereby certify that ~~DO NOT~~ DO NOT own the animal/s described above, that IT IS / IT IS NOT a stray and ~~DO NOT~~ 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>Rebecca MB19719</u>	Witness for Society <u>[Signature]</u>
FOR OFFICE USE: PENDING ADOPTION	Details of second Applicant
Details of first Applicant	Details of third Applicant

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