

ADOPTION CHECKLIST

ADMISSION NO:

MBY10728

CONTRACT NO:

MA0359

- ☒ 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
- ☒ Copy of Vaccination Record/ Certificate
- ☒ Microchip
- ☒ Microchip Registration- chip number_

Adoptee INFO:

Name & Surname Ishmail Maloka

Contact INFO: 0849417140

29/07/26



992003000645625

Completed by: [Signature]

Date: 21/07/26

Manager: _____

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.*

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):

HOME ADDRESS:

ID NO.:

POSTAL ADDRESS:

TEL NO (H):

(B):

CELL NO:

FAX NO:

EMAIL:

Address where animal will be kept:

Occupation:

Do you own or rent your property:

Do you have consent from owner / Body Corporate?

Are you a student with consent to keep pets:

Reason for wanting animal:

Is the animal for yourself?

Is the animal a replacement for a pet which has died from: Distemper/Parvovirus/Snuffles/Cat Flu/Biliary

What breed of dog or cat are you interested in?

Can you afford private fees?

Who is your vet?

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

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?

Is your property fenced and has a proper gate? Will you chain/ an animal?

Full description of the fencing and gate:

Height:

What shelter is provided: OUTDOORS

KENNEL

OTHER

Have you previously had pets from an SPCA?

Are there children under 10 in your household?

Pre Home Inspection Fee:

Receipt No:

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



Garden Route

DOG / CAT	Breed	Male/Female
Microc	992003000645625	

This animal is given to you in the firm and confident belief that it will 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.

ADMISSION No.
TOELATINGSNR.

MA0359



Garden Route

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

UITPLASINGSKONTRAK

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 kliënt skaal, in die terugbesorging van die dier.
- Ek sal die dier 'n redelike kans gee om aan sy nuwe tuiste gewoonde 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 vasgeketting 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 rekbands 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/Mej (Insluitende voorletters):

Ishmael Maloka

HOME ADDRESS
WOONADRES: 288 Protea Drive,
Pinnacle Point
TEL No (H):
TELEFOON Nr (H):

ID/PASSPORT No.:
ID/PASPOORT Nr.: 7708075405085

CELL No:
SELFOON Nr: 084 9417140

(B):
(W):

FAX No:
FAKS Nr:

E-MAIL:
E-POS: malokadr@gmail.com

ADOPTION FEE:
AANEMINGSVOOI: R850

cash / eft / card
kontant / eft / kaart

DONATION:
DONASIE:

KWITANSIE Nr
RECEIPT No. 10821

VEHICLE REG No.
VOERTUIG REG Nr: CBS 57085

VEHICLE MAKE:
VOERTUIG MAAK: Ford

COLOUR:
KLEUR: Grey

SIGNATURE
HANDTEKENING: Ishmael Maloka

WITNESS FOR SOCIETY:
GETUIE VIR VEREENIGING: h88

DATE / DATUM: 21/7/2026

ADMISSION, ASSESSMENT AND HISTORY RECORD



Garden Route

KENNEL No. <u>137</u>				ADMISSION No. <u>MBY10726</u>		
☒ Stray	☐ Surrender	☐ Abandoned	☐ Returned	☐ Impounded	☐ Confiscated	☐ Request for euthanasia
Date in <u>14/05/2016</u>			Time in <u>09:45</u>		Date for release	

IDENTIFICATION & LOST AND FOUND			Lost & Found checked	☒ Yes ☒ No	Lost & Found Date checked	<u>14/05/2016</u>
Microchip/Collar or ID tag found	☒ Yes ☒ No	Date scanned or checked	<u>14/05/2016</u>	Microchip or ID Tag number	<u>none</u>	

DESCRIPTION & HISTORY	Dog	<u>Cat</u> <u>V3</u>	Other species (Specify) <u>4 leg</u>		
	Breed	<u>Tabby</u>	Colour and Markings <u>calico</u>		
	Condition		Sex	<u>Female</u>	Age <u>Adult</u>
	Temperament	<u>friendly</u>	Sterilisation details	<u>no</u>	Name
	Coat	<u>short</u>	Tail	<u>up</u>	Size <u>medium</u>
	Teeth Condition		Ears	<u>up</u>	Date <u>14/05/2016</u>
	Area found / collected from				
	Reason for surrender	<u>stray</u>			

ASSESSMENT		Surrendered by		Name		<u>Tafelberg velds</u>	
GOOD WITH:	Yes No	Found by	☒ Yes ☐ No				
Children		Residential Address	<u>12/12/2016</u>				
Cats		Postal Address	<u>12/12/2016</u>				
Other Dogs		Tel (H)	<u>061 7541613</u>	Tel (W)	<u>061 7541613</u>	Cell	<u>061 7541613</u>
Livestock/Other		Email	<u>none</u>				
DO THEY:	Yes No	Donation R	<u>none</u>	Cash	☐	Card	☐
Jump Fences		EFT		(Receipt No.) <u>none</u>			
Run Away		PLEASE INSIST ON A RECEIPT					

Confiscated: OB No: 1 Case No: 1 Inspector: W. S. S. S.

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 uitdrukklik 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 first Applicant	Details of second Applicant
Details of third Applicant	

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

CONDITIONS / VOORWAARDES

1. The Owner / Finder hereby relinquishes all ownership rights to the animal/s described on the reverse to the SPCA for disposal at its sole discretion on the understanding that the Society shall endeavour to place it in a new home or, if unable to do so, effect its painless destruction.
1. Die Eienaar / Vinder aan hiermee afstand van alle eiendomsreg in die dier/s, beskryf die koersy, ten gunste van die DBV om mee te beskik volgens hul uitsonderlike diskresie met dien verstande dat die Vereniging sal poog om dit in 'n nuwe huis te plaas of, indien hul nie in staat is om dit te doen nie, om sy pynlose vernietiging te bewerkstellig.
2. If in the opinion of a veterinarian or a qualified inspector in terms of Section 5 of Act 71 of 1962 (Animals Protection Act) an animal presented for admission is so diseased, severely injured or in such physical condition that it should be destroyed for humanitarian reasons, the Society shall have the right to effect such destruction by approved humane methods.
2. Indien, volgens mening van 'n veearts of 'n gekwalifiseerde inspekteur in terme van Artikel 5 van Wet 71 van 1962 (Dierebeskermingswet) 'n dier aangebied word vir toelating wat so siek, ernstig beseer of in sodanige fisiese toestand is dat dit vir menslikheidsredes vernietig behoort te word, die Vereniging die reg sal hê om so 'n vernietiging te bewerkstellig deur goedgekeurde menswaardige metodes.
3. Any charges endorsed hereon are due and payable on request.
3. Enige koste hierop onderskryf is verskuldig en betaalbaar op aanvraag.
4. The Society will not home any animal unsterilised.
4. Die Vereniging sal geen dier plaas wat ongesteëliseer is nie.

REQUEST FOR EUTHANASIA

Owners authorising signature		Witness for Society signature
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Reason for Euthanasia

Euthanasie Bottle No: _____ Quantity used: _____ AWA: _____

CLAIMANT

Name: Prof/Dr/Mr/Mrs/Ms (including initials) _____

Residential Address: _____

Tel No (h): _____ Tel No (w): _____ Cell No: _____

Postal Address: _____

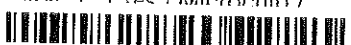
E-mail Address: _____

Reclaim Charge: _____ Added Donation: _____ Cash/EFT/Card (Receipt No.) _____

ID/Passport No: _____ Copy Attached: Yes ☐ No ☐

Vehicle Model _____ Colour _____ Reg. No: _____

Signature: _____ Witness for Society _____

Microchip / Collar / Yes / Microchip / and ID to	 992003000645625	Date <u>21/07/2026</u>
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MEDICAL RECORD

Date	Remarks	Treatment	Cost
20/05/26	Milpro		
05/06/26	Vaccination + milpro		
03/07/26	Vaccination + milpro		
17/7/26	Spray 7-flank		

PTS APPROVAL

NAME	SIGN



992003000645625

ADMISSION NO

MBY 10728

PRE AND POST HOME INSPECTION FORM DOMESTIC ANIMALS

PASSED: ☒ YES ☐ NO

DATE UNDERTAKEN:

16/07/16

TIME: 15:00

NAME OF APPLICANT: Ishmael Malaka

ADDRESS: 288 Protea Drive, Pinnacle Point

HOME TEL No:

CELL No: 084 941 7140

ANIMAL(S) ADOPTING: 2 Cats

SEX: ♀ Calico ♂ Black + white AGE: Adult ♀ Juvenile ♂

PRE-HOME INSPECTION:

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

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

Small pool, Discussed hazard with person who adopts the cats.

PROPERTY APPROVED FOR THE FOLLOWING ANIMALS:



CATS



SMALL DOGS



MEDIUM DOGS



LARGE DOGS

INSPECTED BY:

Kuer

SPCA:

Mosselbay

SIGNATURE:

POST HOME INSPECTIONS

DATE	RESULT	REMARK	BY WHOM

DIAGRAM OF PROPERTY ON REVERSE OF THIS PAGE

MY OWNER

NAME

Ishmeel Maloka

POSTAL ADDRESS

STREET ADDRESS

288 Protea Drive

Female Point

HOME PHONE

WORK PHONE

CELLPHONE

084 941 7140

BREEDER DETAILS

ME

SPECIES

Feline

BREED

DSH

COLOR

Calico

SEX

Female

DATE OF BIRTH

DATE OF DHP/TAT

992003000645625

FEATURE MARKS

NEXT VACCINATION DUE

DATE

DATE

DATE

I WAS VACCINATED ON

DATE

VACCINE AND BATCH NO.

VET SIGNATURE

05/06/26



Sec. 02077/261

Sec. 02077/261

Sec. 02077/261

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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 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 Act 36/1947), Nobivac[®] KC (Reg. No. G2804 Act 36/1947), Nobivac[®] Canine-1 DAPPV (Reg. No. G3992 Act 36/1947), Nobivac[®] Feline-HCP (Reg. No. G3880 Act 36/1947), Nobivac[®] Tricat Tiro (Reg. No. G3712 Act 36/1947), Nobivac[®] Rabies (Reg. No. G2207 Act 36/1947), Quantel[®] Tablets (Reg. No. G2717 Act 36/1947) Contains Praziquantel (isochlorine) 50 mg/tablet and Fenbendazole (benzimidazole) 500 mg/tablet, Exitel Plus (Reg. No. G4228 Act 36/1947) Contains Praziquantel 175 mg, Pyrantel 175 mg (equivalent to 504 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 Fipronil per kg body weight.

MSD Animal Health

Quantel

Exitel Plus

Exitel Plus XL

Bravecto

facebook.com/B/MSD26 South Africa

DATE	PRODUCT	DATE	PRODUCT
11/11/11	11/11/11	11/11/11	11/11/11

05/04/26 14:10:00
03/01/26 14:10:00

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.a and 3 were met before the intended movement.

THE UNIVERSITY OF CHICAGO PRESS

SIGNATURE

PRACTICE STAMP

CERTIFICATE OF STERILISATION

WILLIAMS & GILLS

15

THE

[illegible]

25
10
7
3
0
0
0

1. *Phragmites australis* (Cav.) Trin. ex Steud.

PARLICE STABO



Animal Health

Intervet South Africa (Pty) Ltd, Reg. No. 1991/006590/07
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.msd-animal-health.co.za ZA-NOV/21/200001

www.msds-animal-health.com ZA-NOV-211200001

Quantum Entanglement

2000-2001

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Journal of Internal Medicine 247: 161–168



Customer Care Inquiries
Tel: +2783135 Tel: 135 (free from MTN cellphone)
E-mail: customercare@mtn.co.za
Website: www.mtn.co.za



Mr ISHMAEL SEETJE MALOKA
288 288 Protea Drive, Protea Drive
Pinnacle Point
Mossel Bay

Email Address malokadr@gmail.com
Invoice date 01-07-2026
Invoice number I600000356351860
Billing account BA151049775
Payment Method Direct Debit
Due date 04-07-2026

Tax Invoice

Summary of charges for your MTN plan:

Home Premium Uncapped 50Mbps Monthly

Contract date: 01-07-2026 to 31-07-2026

Description	Service Reference	From	To	Amount excl. VAT
Inclusive Data	27838575744	01-08-2026	31-08-2026	0.00
Itemised Billing	27838575744	01-08-2026	31-08-2026	0.00
Home Premium Uncapped 50Mbps Monthly	27838575744	01-08-2026	31-08-2026	538.26
Sub total: (excl. VAT)				R538.26

Home Starter Uncapped 15Mbps Monthly

Contract date: 01-07-2026 to 31-07-2026

Description	Service Reference	From	To	Amount excl. VAT
Home Starter Uncapped 15Mbps Monthly	27832821688	01-08-2026	31-08-2026	294.78
Itemised Billing	27832821688	01-08-2026	31-08-2026	0.00
Inclusive Data	27832821688	01-08-2026	31-08-2026	0.00
Sub total: (excl. VAT)				R294.78

Usage Charges

Description	Service Reference	Volume/Duration	Qty.	Amount excl. VAT
Local Data Usage	27832821688	86.77 GB	133	0.00
Sub total: Usage Charges (excl. VAT)				R0.00

Usage Charges

Description	Service Reference	Volume/Duration	Qty.	Amount excl. VAT
Local Data Usage	27838575744	671.00 GB	949	0.00
Sub total: Usage Charges (excl. VAT)				R0.00





Customer Care Inquiries
Tel: +2783135 Tel: 135 (free from MTN cellphone)
E-mail: customer care@mtn.co.za
Website: www.mtn.co.za

Total VAT(15%)

R124.96

Total Invoice for current period (VAT Incl.)

R958.00

Claw-back penalty fees will apply on the Free-to-Use router should you fail to meet monthly subscription payments.



We're happy to help

Our customer care helpline is available 24 hours a day, 7 days a week. Dial **135** from an MTN cellphone (free of charge) or **083 135** from another network (charged at your network rate).

To skip the authentication process in the future, set up a PIN with one of our agents. Fast track customer service by turning on your caller ID; we use this ID to pick up your account.

Account queries

Contact our customer care helpline on **135 (MTN line)/083 135** (non-MTN line) or email customercare@mtn.com

i Non-debit order account payments are due 21 days from the date of the invoice.

How to update your information

You can change your personal or banking details with any one of these options:

1. Chat to us live on social media
Facebook: [Facebook.com/MTNza](https://www.facebook.com/MTNza)
Twitter: [@MTNza](https://twitter.com/MTNza)
2. Email us at customercare@mtn.com
3. Contact our customer care helpline on **135 (MTN line)/083 135** (Non-MTN line)

Helpful information for you

General

It is the subscriber's responsibility to ensure that all added services requested are charged as separate items. If anything is omitted, please call **135 (MTN line)/083 135** (non-MTN line).

Loss and theft

If your cellphone or SIM card is lost or stolen, report it to the MTN customer care department immediately. Your SIM card will be suspended and your cellphone will be blacklisted. You will also need to obtain a case number from the police for insurance purposes. Remember that your airtime contract will remain valid.

International dialling and roaming

To make international calls from South Africa or use your cellphone abroad, please contact the call centre **48 hours** before leaving to activate international roaming. If you opt to use SMS roaming only, simply dial ***135#** while still in South Africa.

Itemised billing

Itemised billing incurs an extra charge and is included in your statement. To activate this, go in store or call **135 (MTN line)/083 135** (non-MTN line). You can also get itemised billing on the MTN App. Download it from the Google Play Store, the App Store or the AppGallery.

Credit limit

Your credit limit is applied to your account and not per cellphone number linked to your account. This means that all cellphone numbers share the same credit limit.

The credit limit is not a guaranteed service. You will remain liable for all charges incurred above the limit. Credit limits for voice and data are not applicable while roaming outside of South Africa due to the time delays in billing records.

If you have a complaint which is not resolved to your satisfaction within 14 days, you may escalate to the Independent Communications Authority of South Africa at consumer@icasa.org.za or visit <https://www.icasa.org.za/pages/consumer-complaints-procedure>. Any contractual disputes which have not been resolved by MTN may be referred to the Consumer Goods and Services Ombudsman. Shared Call: 0860 000 272 or WhatsApp: 061 510 5038 or 081 335 3005

Payment options

MTN is loaded as a public beneficiary with the following banks:

FNB	MTN Contract Payments
ABSA	MTN Postpaid Contract Payments
Standard Bank	MTN Postpaid Contract
Nedbank	Mobile Telephone Networks (PTY) LTD

MTN bank details

Bank: **ABSA Bank**
Account no: **4063304150**
Branch code: **632005**
Reference: **Your MTN Cellphone Number or Account Number**

Scan this QR code with your camera or banking app.



Card: **VISA**
Capitec Pay: **Capitec**
Scan to Pay: **Standard Bank, FNB, ABSA, Nedbank, MTN, Vodacom, Telkom, Cell C, 100%**

Pay your bill with this barcode at any of these retailers.



Pay@ref No: 1115627838575744



ACKERMANS, SPAR Checkers, PEP, PEP SOME, PEP, SPAR, SHOPSITE, Pick n Pay, mokozi, Top Up

Service locking

Should the credit threshold be reached during a voice call or data download, your contract will only be locked after that action is completed. To restore your service, you will need to make a payment on your account or request a temporary credit limit increase.

While MTN will take every precaution to ensure that the service locking notifications are sent timeously, MTN will not be held liable if the notification is not delivered.

Premium-rated charges

Where premium rates apply e.g., competitions, donations, etc you will be charged more than the standard call or SMS rate. This amount depends on the context.

Content

Content subscriptions from MTN Play or WASP services are charged depending on the content. These subscriptions are billed daily, weekly, or monthly and come out of your airtime.

i Manage your subscriptions or increase your premium rated services limit by dialling the USSD number ***123#** and following the prompts, or in the "Account" tab on the MTN App. (Download it from the Google Play Store, the App Store or the AppGallery.)



REPUBLIC OF SOUTH AFRICA
NATIONAL IDENTITY CARD

Surname:
MALOKA
Names:
ISHMAEL SEETJE
Sex:
M
Nationality:
RSA
Identity Number:
7708075405085
Date of Birth:
07 AUG 1977
Country of Birth:
RSA
Status:
CITIZEN



Signature:

Date of Issue

12 JUL 2016

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 99

102495077

102495077



MICROCHIPPED ANIMAL REGISTRATION FORM

Microchip Number



992003000645625

VET OR WELFARE ORGANISATION

Vet Practice Number *

Vet Practice Name *

Vet Practice Phone - Daytime *

PET OWNER INFORMATION

Cell No. * 084 941 714 0

E-mail * maloka.dr@gmail.com

Title * DR Initials * I

Street 288 Protea Drive

Suburb

Country

Phone - Day time

OTHER CONTACTS

Title * Initials *

Cell No. *

Title * Initials *

Cell No. *

Title * Initials *

Cell No. *

CHIP DETAILS

Registration Date * 29 - 07 - 2026

Date of Implant * 21 - 07 - 2026

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

Name of Vet who implanted the Chip KAY LEUERS

PET DETAILS

Pet Name

Species * FELINE

Colour CALICO

Gender Male ☒ Female

KENNEL UNION OF SOUTH AFRICA (KUSA)

Are you a KUSA Registered Member? Yes ☐ No ☐

KUSA Registration Number

Pet Registered Name

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

- On-line Log onto www.backhome.co.za. Complete the registration process.
- By fax Fax this completed form to BackHome on 0800 222 546 (TOLL FREE) or 011 852 6364
- By e-mail Scan and E-mail the completed form to backhome@virbac.co.za or backhome.support.external@virbac.co.za
- By App Download the Virbac Backhome Africa App

