

ADOPTION CHECKLIST

ADMISSION NO:

T0960

CONTRACT NO:

MA 0351

- ☒ 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 09/07/2026
- ☒ Copy of Vaccination Record/ Certificate
- ☒ Microchip
- ☒ Microchip Registration- chip number _____

Adoptee INFO:

Name & Surname Cara Brits

Contact INFO: 079 874 2992

15/07/26



Completed by: _____

Date: 10/07/2026

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.

FOR WEDNESDAY



992003000650803 ADMISSION NO

T0960

PRE AND POST HOME INSPECTION FORM DOMESTIC ANIMALS

PASSED: YES / NO

DATE UNDERTAKEN: 08/07/08

TIME: 03:20

NAME OF APPLICANT: Cara Brits

ADDRESS: 60 B Marsh Street, Robertson, Woonstelle, Unit SC 04

HOME TEL No: CELL No: 079 874 2992

ANIMAL(S) ADOPTING: Great Dane

SEX: Female AGE: 9 months

PRE- HOME INSPECTION:

PROPERTY DESCRIPTION			
Type and height of fence:	Brick wall 2m		
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
Dog will have her own room

PROPERTY APPROVED FOR THE FOLLOWING ANIMALS:

☐ CATS

☒ SMALL DOGS

☒ MEDIUM DOGS

☒ LARGE DOGS

INSPECTED BY: dnt/gover

SPCA: Mosselbay

SIGNATURE: [Signature]

POST HOME INSPECTIONS

DATE	RESULT	REMARK	BY WHOM

DIAGRAM OF PROPERTY ON REVERSE OF THIS PAGE

Garage

~~Gate~~
Steps
~~X~~Grate

→ Pavement →

→ Belcom →

House

House
Door

Outside
Toilet

→ Pavement → D

Grate
Back yard

ADMISSION, ASSESSMENT AND HISTORY RECORD



Garden Route

KENNEL No. <u>K20 30</u>		ADMISSION No. <u>T 0960</u>				
Stray	Surrender ☒	Abandoned	Returned	Impounded	Confiscated	Request for euthanasia
Date In	<u>15-6-2026</u>		Time In	<u>10:16</u>		Date for release

IDENTIFICATION & LOST AND FOUND			Lost & Found checked	Yes	Lost & Found
Microchip/Collar or ID tag found	Yes	Date scanned or checked	NA	No	Date checked
	No				NA
				Microchip or ID Tag number	NA

DESCRIPTION & HISTORY	Dog	Cat	Other species (Specify)			
	Breed	<u>Great Dane</u>		Colour and Markings	<u>Fawn</u>	
	Condition	<u>Fair</u>		Sex	<u>♀</u>	
	Temperament	<u>Fair</u>		Sterilisation Details	<u>Not</u>	
	Coat	<u>Short</u>	Tail	<u>Long</u>	Teeth Condition	<u>Fair</u>
	Area found / collected from	<u>Alberton</u>		Ears	<u>2 Hanging</u>	
	Reason for surrender	<u>Husband don't want dog.</u>				
					Size	<u>Large</u>
				Date	<u>15-6-2026</u>	

ASSESSMENT		
GOOD WITH:	YES	NO
Children		
Cats		
Other dogs		
Livestock / Other		
DO THEY:		
Jump Fences		
Run Away		
COMMENTS:		

Surrendered by	☒	Name	<u>Zelda Human</u>
Found by			
Residential Address	<u>15 W. Talan Str. Alberton</u>		
Postal Address			
Tel (H)	Tel (W)	Cell	<u>082 783 161</u>
Email			
Donation R	Cash	Card	EFT (Receipt No.)

PLEASE INSIST ON A RECEIPT

Confiscated: OB No: _____ Case No: _____ Inspector: _____

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 amtenare, 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	Witness for Society
<u>[Signature]</u>	<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: _____

CONDITIONS / VOORWAARDES

- | | |
|---|--|
| <p>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.</p> <p>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.</p> <p>3. Any charges endorsed hereon are due and payable on request.</p> <p>4. The Society will not home any animal unsterilised.</p> | <p>1. Die Eienaar / Vinder doen hiermee afstand van alle eiendomsreg in die dier/e, beskryf op die keersy, ten gunste van die DBV om mee te beskik volgens hul uitsluitlike diskresie met die dien verstande dat die Vereeniging 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.</p> <p>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 Vereeniging die reg sal hê om so 'n vernietiging te bewerkstellig deur goedgekeurde menswaardige metodes.</p> <p>3. Enige koste hierop onderskryf is verskuldig en betaalbaar op aanvraag.</p> <p>4. Die Vereniging sal geen dier plaas wat ongesteriliseer is nie.</p> |
|---|--|

REQUEST FOR EUTHANASIA

Owners authorising signature		Witness for Society signature	
Reason for Euthanasia			

Euthanase 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: _____

Email Address: _____

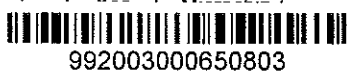
Reclaim Charge: _____ Added Donation: _____ Cash/EFT/Card (Receipt No.) _____

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

Vehicle Model _____ Colour _____ Reg. No: _____

Signature: _____ Witness for Society _____

Microchip / Collar and ID tag given



992003000650803

Date 08/07/2026

MEDICAL RECORD

Date	Remarks	Treatment	Cost
19/06/26	Vaccinate + deworm		
09/07/2026	GA: Stentrecol. Dr SM		

PTS APPROVAL

NAME	SIGN

MY OWNER

NAME **CARA BEITS**

POSTAL ADDRESS **60 G Marsh Street**

Robertson Woonstelle, Unit 504

HOME PHONE **079 874 2992**

CELL PHONE **079 874 2992**

BREEDER DETAILS

ME

SPECIES **CANINE**

BREED **Great Dane**

COLOUR **Fawn**

SEX **Female**

DATE OF BIRTH

DATE OF RECEIPT

IDENTIFICATION MARKS

992003000650803

NEXT VACCINATION DUE

DATE DATE DATE

I WAS VACCINATED ON

DATE **19/06/26**

VACCINE AND BATCH NO. **09/07/25**

VET SIGNATURE **BTC**

924507

13/07/2026

7/21/85

I WAS VACCINATED ON

DATE

VACCINE AND BATCH NO.

VET SIGNATURE

One of the best ways to keep your dog healthy is to keep them up to date with their vaccinations. This is why we offer a range of vaccines to protect your dog from a variety of diseases. We also offer a range of flea and worm treatments to keep your dog healthy and happy. Please contact us for more information.

Nobivac® DHPPi (Reg. No. G2377 Act 36/1947), Nobivac® KC (Reg. No. G2604 Act 36/1947), Nobivac® Canine-1 DAPPV (Reg. No. G3892 Act 36/1947), Nobivac® Feline-KCP (Reg. No. G3880 Act 36/1947), Nobivac® Tricat Trio (Reg. No. G3712 Act 36/1947), Nobivac® Rabies (Reg. No. G2207 Act 36/1947), Quantel® Tablets (Reg. No. G2717 Act 36/1947) Contains Praziquantel (isoginoline) 50 mg/tablet and Fenbendazole (benzimidazole) 500 mg/tablet, Exitel Plus (Reg. No. G4226 Act 36/1947) Contains Praziquantel 175 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.

IT WAS DEWORMED ON

DATE PRODUCT DATE PRODUCT

19/06/06 Triumvir D

Exatel Plus Exatel Plus XL
DEWORMING FOR HOPPER-HELMED DOGS

NOTE TO MY OWNER

Regular vaccines as prescribed by my veterinarian and deworming every 2 weeks for under 12 weeks of age and every 3 months when 12 months or 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

Garden Route SPCA

P.O. Box 258

George 6530

Ph (044) 693 0824

SIGNATURE

PRACTICE STAMP

CERTIFICATE OF STERILISATION

VETERINARIAN'S SIGNATURE

DATE

DOCTOR'S NAME

[Signature]
09/07/2006
Dr. A.S. Mulla

GARDEN ROUTE SPCA

P.O. BOX 258

GEORGE 6530

TEL: 044 693 0824 / 072 281 1761

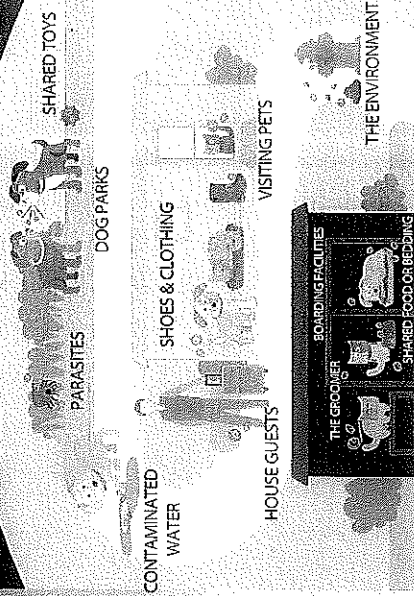
PRACTICE STAMP



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 3156, Sales Fax: 086 603 1777
www.msdafrica.com

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



PET'S NAME

MY VET

GARDEN ROUTE SPCA

MOSSEL BAY

18 BILL JEFFERY AVE

KWANONQABA

044 693 0824

072 281 1761

theatrem@grspca.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

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. Cara Brits

HOME ADDRESS: 60B Marsh street, Robertson Woonstelle

Unit 5004 ID NO.: 9711210023084

POSTAL ADDRESS: Same as home.

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

CELL NO: 079 874 2992 FAX NO: _____

EMAIL: carabrits@gmail.com

Address where animal will be kept: 60B Marsh street, Robertson Woonstelle ^{Unit 5004}

Occupation: Data Scientist.

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

Are you a student with consent to keep pets: YES/NC

Reason for wanting animal: Compania

Is the animal for yourself? Yes. YES/NC

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

What breed of dog or cat are you interested in? Great Dane

Can you afford private fees? Yes Who is your vet? Heide and dore klenick

How many animals live on the property? DOGS? 0 CATS? 0 OTHERS 0

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

Are all your animals sterilised? Give details N/A

How many dogs and cats have you owned in the last 3 years? DOGS? _____ CATS? 1 OTHER? _____

Which animals do you still have, and what happened to the others? Cat living with my parents.

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

Full description of the fencing and gate: Cement wall with security gate Height: 1.8m.

What shelter is provided: OUTDOORS _____ KENNEL _____ OTHER Indoor.

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: 10157

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 [Signature] Date of application 3/7



Garden Route

DOG CAT	Breed	Male Female
Microchip and or ID Tag		



992003000650803

This animal has been 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.

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

HOME ADDRESS
WOONADRES: 60 B Marsh Str.
TEL No (H): Robertson Woonstels, Unit 504
TELEFOON Nr (H):

CELL No:
SELFPOON Nr: 079 874 2992

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

ADOPTION FEE:
AANEMINGSVOOL: R850

VEHICLE REG No.
VOERTUIG REG Nr. CAA 715065

SIGNATURE
HANDTEKENING: [Signature]

DATE / DATUM: 10/07/26

ADMISSION No.
TOELATINGSNR.

MA0351



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 plesier 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 skaaf, 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 hulsves 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 vasgekettering 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 verwaarloos 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.

Cara Brits

ID/PASSPORT No.:
ID/PASPOORT Nr.: 9711210023084

(B):
(W):

FAX No:
FAKS Nr:

DONATION:
DONASIE: KWITANSIE Nr
RECEIPT No. 10185

VEHICLE MAKE:
VOERTUIG MAAK: Chevy COLOUR:
KLEUR: White

WITNESS FOR SOCIETY:
GETUIE VIR VEREENIGING: [Signature]

MICROCHIPPED ANIMAL REGISTRATION FORM

MICROCHIP INFORMATION



992003000650803

VET OR WELFARE ORGANISATION

Vet Practice Number *

Vet Practice Name *

Vet Practice Phone - Daytime *

PET OWNER INFORMATION

Cell No. * 079 874 2992

E-mail * carabrits@gmail.com

Title * MS Initials * C

Street 60 B Marsh STREET

Suburb Unit 5004

Country

Phone - Day time

OTHER CONTACTS

Title * Initials *

Cell No. *

Title * Initials *

Cell No. *

Title * Initials *

Cell No. *

CHIP DETAILS

Registration Date * 15 - 07 - 2029

Date of Implant * 09 - 07 - 2026

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

Name of Vet who implanted the Chip KAY LEVERS

PET DETAILS

Pet Name

Species * CANINE

Colour FAWN

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 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 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 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

Please note that it is the Pet Owner's responsibility to ensure that the Pet's details are registered on the BackHome Database

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 * BRITS

City

Area Code ROBERTSON WOONSTELLE - MOSSCLAY

Province

Phone - Night time

Surname *

Surname *

Surname *

Date of birth

Breed * GREAT DANE

Markings

Sterilised ☒ Yes ☐ No

MEDICAL

Medical Conditions

Medical Insurance Company

Medical Insurance Policy Number

Medical Insurance Phone



REPUBLIC OF SOUTH AFRICA
NATIONAL IDENTITY CARD

Surname:
BRITS
Names:
CARA
Sex:
F
Nationality:
RSA
Identity Number:
9711210023004
Date of Birth:
21 NOV 1997
Country of Birth:
RSA
Status:
CITIZEN



Signature:



Conditions:

Date of Issue:
27 NOV 2023

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 50

117644795



ANNEXURE A

Additional household members and emergency contacts

1. Spouse details

- Full name : Antionette du Preez
- Contact number : 071 549 4000
- Email address : antionettedp@gmail.com

2. Additional family member/friend details

- Full name : Mike Bnts
- Contact number: 068 636 5184
- Email address : mike@bakt.co.za

3. Precious SPCA Adoption

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

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

Signature



Date

10/7/26



CARA BRITS

SCO4 Robertson Flats
60 Marsh Street
Mossel Bay
6500
South Africa

Trebla Properties
Company Name: Papinka Moller One CC
Reg. No. 2000/069268/23
VAT number: 4360215307

7 Point Road
Mossel Bay
6500
Tel: 082 556 4896
E-mail: property@trebla.co.za

STATEMENT

Payment reference: GJK868

Property: SCO4 Robertson Flats, 60 Marsh Street (Erf 3184)

Statement period: 2026-05-26 to 2026-07-06

Date	Ref no	Description	Method	Debit	Credit	Balance
2026-05-26		Opening balance				0.00
2026-05-26	68238244	Payment	Direct Deposit	-9,000.00		-9,000.00
2026-06-01	PP21012-4	Invoice - Deposit		4,000.00		-5,000.00
2026-06-01	PP21012-1	Invoice - Monthly Rent		8,000.00		3,000.00
2026-06-01	PP21012-2	Invoice - Basic Electricity Charge		378.79		3,378.79
2026-06-01	PP21012-3	Invoice - Refuse (R300.59) & Sewerage (R320.62)		621.21		4,000.00
2026-06-02	68402729	Credit note - Credit note against invoice no. PP21012-4			-4,000.00	0.00
2026-06-26	68763938	Payment	Direct Deposit	-9,000.00		-9,000.00
2026-07-01	PP21680-1	Invoice - Monthly Rent		8,000.00		-1,000.00
2026-07-01	PP21680-2	Invoice - Basic Electricity Charge		378.79		-621.21
2026-07-01	PP21680-3	Invoice - Refuse (R300.59) & Sewerage (R320.62)		621.21		0.00
Balance due on 2026-07-06						0.00

WAYS TO PAY

DIRECT DEPOSIT

Account number: **4109354825**
Bank name: **ABSA**
Branch code: **632005**
SWIFT code: **ABSAZAJJ**
Account name: **Trebla Properties**

Payment reference: **GJK868**

DIGITAL CHANNEL PAYMENT OPTION

When using this payment method, a fixed digital channel fee of R19.32 (incl. VAT) may be applied to your tenant statement for settlement. If you need assistance, please contact your agency. Please allow 3-4 working days for your payment to reach us.

Please quote this Bill Payment Reference: **11364 0261 7000 8686 1**

Powered by  **PayProp**
a Reapit company

PayProp, in its capacity as a licensed property practitioner, is contractually authorised to manage rental payments.

