



Admission Form

CONTRACT NO.

MA 0373



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 October

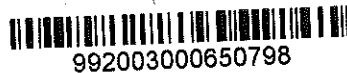
Copy of Vaccination Record/ Certificate



Microchip



Microchip Registration- chip number \_\_\_\_\_



992003000650798

Completed by: \_\_\_\_\_

Date: 06/08/26

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 processed.*

*All documents relating to a single adoption must be kept together in a single bundle, in order of checklist.*



Mayer

# 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): Marguerite Steyn

HOME ADDRESS: 19 Baegoe laan, Hartland

ID NO.: 9506230072081

POSTAL ADDRESS: 11

TEL NO (H): \_\_\_\_\_ (B): \_\_\_\_\_

CELL NO: 0662390871 FAX NO: \_\_\_\_\_

EMAIL: mrmargiersteyn@gmail.com

Address where animal will be kept: 19 Baegoe laan

Occupation: Teacher

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

YES/N

Are you a student with consent to keep pets:

Reason for wanting animal: Friend for Pongo

Is the animal for yourself? yes YES

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

What breed of dog or cat are you interested in? Jack Russel

Can you afford private fees? yes Who is your vet? Croft Animal Hosp

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

What are the sexes of your animals? DOGS: Male ☒ Female ☒ CATS: Male \_\_\_\_\_ Female \_\_\_\_\_

Are all your animals sterilised? Give details yes

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

Which animals do you still have, and what happened to the others? 2, 1 passed away of pancreatitis

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

Full description of the fencing and gate: clearview Height: 1,2m

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? n

Pre Home Inspection Fee: R100 Receipt No: 10853

**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 M Steyn Date of application 3 Dec 2017



Garden Route

|           |                 |               |
|-----------|-----------------|---------------|
| DOG / CAT | Breed           | Male / Female |
| Microchip | 992003000650798 |               |

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 rehomed 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/Mvri/Mej (Insluitende voorletters):

HOME ADDRESS  
WOONADRES: 19 Boegoe laan, Hartland

TEL No (H):  
ELEFOON Nr (H):

CELL No:  
ELEFOON Nr: 0662390871

EMAIL:  
POS: Mrs Margie Steyn@gmail.com

ADOPTION FEE:  
ANEMINGSVOOI: R 850

VEHICLE REG No.  
OERTUIG REG Nr:

SIGNATURE  
Ondtekening: M Steyn

DATE / DATUM: 06/08/26

ADMISSION No.  
TOELATINGSNR.

MA0373



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 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 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 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.

Marguerite Steyn

ID/PASSPORT No.: 9S06230072081

(B):  
(W):FAX No:  
FAKS Nr:cash / eft / card  
kontant / eft / kaartDONATION:  
DONASIE:KWITANSIE Nr  
RECEIPT No.VEHICLE MAKE:  
VOERTUIG MAAK:Hyundai Accent COLOUR:  
KLEUR:WITNESS FOR SOCIETY:  
GETUIE VIR VEREENIGING.



992003000650798

Section 4-12a

ADOPTION No

MA0373

ADMISSION

T1322

## PRE AND POST HOME INSPECTION FORM

PASSED: YES / NO

DATE UNDERTAKEN: 04/08/20 TIME: 11:40

NAME OF APPLICANT: Marguerite Seyn

ADDRESS: 19 Boegoe Laan, Hartland

HOME TEL No: CELL No: 0662390871

ANIMAL(S) ADOPTING: JR X

SEX: ♀ AGE: 8 weeks

## PRE- HOME INSPECTION:

| PROPERTY DESCRIPTION                         |                                                                       |                                       |                                                                       |
|----------------------------------------------|-----------------------------------------------------------------------|---------------------------------------|-----------------------------------------------------------------------|
| Type of fence:                               | wire fenced                                                           | Height of fence:                      | 1.5                                                                   |
| Any sign of Kennel/Shelter?                  | YES <input checked="" type="checkbox"/> / NO <input type="checkbox"/> | Any sign of Chain/Runner?             | YES <input type="checkbox"/> / NO <input checked="" type="checkbox"/> |
| Is the front yard separated from the back?   | YES <input checked="" type="checkbox"/> / NO <input type="checkbox"/> | If yes, what partitioning?            |                                                                       |
| Any hazards? (pool, rubble, razor wire, etc) | YES <input type="checkbox"/> / NO <input checked="" type="checkbox"/> | Specify:                              |                                                                       |
| Does applicant live at the address?          | YES <input checked="" type="checkbox"/> / NO <input type="checkbox"/> | How many animals are on the property? | 2                                                                     |

## DESCRIPTION OF ANIMALS ON PROPERTY

|            | 1                                                                     | 2                                                                     | 3                                                          | 4                                                          | 5                                                          |
|------------|-----------------------------------------------------------------------|-----------------------------------------------------------------------|------------------------------------------------------------|------------------------------------------------------------|------------------------------------------------------------|
| BREED      | JR                                                                    | Yorkie                                                                |                                                            |                                                            |                                                            |
| SEX        | M                                                                     | F / 13                                                                |                                                            |                                                            |                                                            |
| AGE        | 6 y                                                                   |                                                                       |                                                            |                                                            |                                                            |
| STERILIZED | YES <input checked="" type="checkbox"/> / NO <input type="checkbox"/> | YES <input checked="" type="checkbox"/> / NO <input type="checkbox"/> | YES <input type="checkbox"/> / NO <input type="checkbox"/> | YES <input type="checkbox"/> / NO <input type="checkbox"/> | YES <input type="checkbox"/> / NO <input type="checkbox"/> |

## OTHER INFORMATION / COMMENTS

Free Roaming  
No welfare concerns found

PROPERTY APPROVED FOR THE FOLLOWING ANIMALS:

☒ SMALL DOGS☒ MEDIUM DOGS☐ LARGE DOGS☒ CATS☐ EQUINE☐ OTHER (specify)

INSPECTED BY:

Chris Pinner

SPCA:

Mosselbag

SIGNATURE:

## POST HOME INSPECTIONS

| DATE | RESULT | REMARK | BY WHOM |
|------|--------|--------|---------|
|      |        |        |         |
|      |        |        |         |
|      |        |        |         |

DIAGRAM OF PROPERTY ON REVERSE OF THIS PAGE

New inclusion July 2013

Montego dog food.



# ADMISSION, ASSESSMENT AND HISTORY RECORD



Garden Route

|                            |                  |           |          |                             |                  |                        |
|----------------------------|------------------|-----------|----------|-----------------------------|------------------|------------------------|
| KENNEL No. <u>10/07/16</u> |                  |           |          | ADMISSION No. <u>T 1322</u> |                  |                        |
| Stray                      | <u>Surrender</u> | Abandoned | Returned | Impounded                   | Confiscated      | Request for euthanasia |
| Date In                    | <u>10/07/16</u>  |           | Time In  | <u>12:10</u>                | Date for release |                        |

| IDENTIFICATION & LOST AND FOUND                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                     |                       |                                          | Lost & Found checked | Yes                                    | Lost & Found Date checked |                       |     |     |                                    |  |  |  |       |                  |                                          |  |  |  |           |             |     |          |     |                 |             |                 |                       |             |      |          |      |              |      |             |      |                  |                             |               |      |           |      |              |                      |                       |      |                 |  |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------|------------------------------------------|----------------------|----------------------------------------|---------------------------|-----------------------|-----|-----|------------------------------------|--|--|--|-------|------------------|------------------------------------------|--|--|--|-----------|-------------|-----|----------|-----|-----------------|-------------|-----------------|-----------------------|-------------|------|----------|------|--------------|------|-------------|------|------------------|-----------------------------|---------------|------|-----------|------|--------------|----------------------|-----------------------|------|-----------------|--|--|
| Microchip/Collar or ID tag found                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <input checked="" type="checkbox"/> | Yes                   | Date scanned or checked                  | <u>10/07/16</u>      | <input checked="" type="checkbox"/> No | <u>10/07/16</u>           |                       |     |     |                                    |  |  |  |       |                  |                                          |  |  |  |           |             |     |          |     |                 |             |                 |                       |             |      |          |      |              |      |             |      |                  |                             |               |      |           |      |              |                      |                       |      |                 |  |  |
| <table border="1"> <tr> <td rowspan="8">DESCRIPTION &amp; HISTORY</td> <td>Dog</td> <td>Cat</td> <td colspan="4">Other species (Specify) <u>3kg</u></td> </tr> <tr> <td>Breed</td> <td><u>Greyhound</u></td> <td colspan="4">Colour and Markings <u>white / brown</u></td> </tr> <tr> <td>Condition</td> <td><u>fair</u></td> <td>Sex</td> <td><u>♀</u></td> <td>Age</td> <td><u>juvenile</u></td> </tr> <tr> <td>Temperament</td> <td><u>friendly</u></td> <td>Sterilisation Details</td> <td><u>none</u></td> <td>Name</td> <td><u>—</u></td> </tr> <tr> <td>Coat</td> <td><u>short</u></td> <td>Tail</td> <td><u>long</u></td> <td>Feet</td> <td><u>Condition</u></td> </tr> <tr> <td>Area found / collected from</td> <td><u>EXT 13</u></td> <td>Ears</td> <td><u>up</u></td> <td>Size</td> <td><u>small</u></td> </tr> <tr> <td>Reason for surrender</td> <td><u>Can not afford</u></td> <td>Date</td> <td><u>10/07/16</u></td> <td></td> <td></td> </tr> </table> |                                     |                       |                                          |                      |                                        |                           | DESCRIPTION & HISTORY | Dog | Cat | Other species (Specify) <u>3kg</u> |  |  |  | Breed | <u>Greyhound</u> | Colour and Markings <u>white / brown</u> |  |  |  | Condition | <u>fair</u> | Sex | <u>♀</u> | Age | <u>juvenile</u> | Temperament | <u>friendly</u> | Sterilisation Details | <u>none</u> | Name | <u>—</u> | Coat | <u>short</u> | Tail | <u>long</u> | Feet | <u>Condition</u> | Area found / collected from | <u>EXT 13</u> | Ears | <u>up</u> | Size | <u>small</u> | Reason for surrender | <u>Can not afford</u> | Date | <u>10/07/16</u> |  |  |
| DESCRIPTION & HISTORY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Dog                                 | Cat                   | Other species (Specify) <u>3kg</u>       |                      |                                        |                           |                       |     |     |                                    |  |  |  |       |                  |                                          |  |  |  |           |             |     |          |     |                 |             |                 |                       |             |      |          |      |              |      |             |      |                  |                             |               |      |           |      |              |                      |                       |      |                 |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Breed                               | <u>Greyhound</u>      | Colour and Markings <u>white / brown</u> |                      |                                        |                           |                       |     |     |                                    |  |  |  |       |                  |                                          |  |  |  |           |             |     |          |     |                 |             |                 |                       |             |      |          |      |              |      |             |      |                  |                             |               |      |           |      |              |                      |                       |      |                 |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Condition                           | <u>fair</u>           | Sex                                      | <u>♀</u>             | Age                                    | <u>juvenile</u>           |                       |     |     |                                    |  |  |  |       |                  |                                          |  |  |  |           |             |     |          |     |                 |             |                 |                       |             |      |          |      |              |      |             |      |                  |                             |               |      |           |      |              |                      |                       |      |                 |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Temperament                         | <u>friendly</u>       | Sterilisation Details                    | <u>none</u>          | Name                                   | <u>—</u>                  |                       |     |     |                                    |  |  |  |       |                  |                                          |  |  |  |           |             |     |          |     |                 |             |                 |                       |             |      |          |      |              |      |             |      |                  |                             |               |      |           |      |              |                      |                       |      |                 |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Coat                                | <u>short</u>          | Tail                                     | <u>long</u>          | Feet                                   | <u>Condition</u>          |                       |     |     |                                    |  |  |  |       |                  |                                          |  |  |  |           |             |     |          |     |                 |             |                 |                       |             |      |          |      |              |      |             |      |                  |                             |               |      |           |      |              |                      |                       |      |                 |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Area found / collected from         | <u>EXT 13</u>         | Ears                                     | <u>up</u>            | Size                                   | <u>small</u>              |                       |     |     |                                    |  |  |  |       |                  |                                          |  |  |  |           |             |     |          |     |                 |             |                 |                       |             |      |          |      |              |      |             |      |                  |                             |               |      |           |      |              |                      |                       |      |                 |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Reason for surrender                | <u>Can not afford</u> | Date                                     | <u>10/07/16</u>      |                                        |                           |                       |     |     |                                    |  |  |  |       |                  |                                          |  |  |  |           |             |     |          |     |                 |             |                 |                       |             |      |          |      |              |      |             |      |                  |                             |               |      |           |      |              |                      |                       |      |                 |  |  |

| ASSESSMENT        |                                     |    |
|-------------------|-------------------------------------|----|
| GOOD WITH:        | YES                                 | NO |
| Children          |                                     |    |
| Cats              | <input checked="" type="checkbox"/> |    |
| Other dogs        | <input checked="" type="checkbox"/> |    |
| Livestock / Other | <input checked="" type="checkbox"/> |    |
| DO THEY:          |                                     |    |
| Jump Fences       | <input checked="" type="checkbox"/> |    |
| Run Away          | <input checked="" type="checkbox"/> |    |
| COMMENTS:         |                                     |    |

|                |             |                     |                          |
|----------------|-------------|---------------------|--------------------------|
| Surrendered by | <u>A</u>    | Name                | <u>Do 1050's Frances</u> |
| Found by       |             | Residential Address | <u>Ext 13</u>            |
| Postal Address |             | Tel (H)             | <u>none</u>              |
| Tel (W)        | <u>none</u> | Cell                | <u>0631654644</u>        |
| Email          | <u>none</u> | Donation R          | <u>none</u>              |
| Cash           |             | Card                |                          |
| EFT            |             | (Receipt No.)       | <u>none</u>              |

PLEASE INSIST ON A RECEIPT

Confiscated: OB No: none Case No: none Inspector: KUER

## 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                        | <u>Refer to T1325</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: \_\_\_\_\_

## 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.
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.
3. Any charges endorsed hereon are due and payable on request.
4. The Society will not home any animal unsterilised.

1. Die Eienaar / Vinder doen hiernaas 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 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. 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. Enige koste hierop onderskryf is verskuldig en betaalbaar op aanvraag.
4. Die Vereniging sal geen dier plaas wat ongesteiriliseer is nie.

### 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 / C  
and ID tag gi



992003000650798

Date 05/08/26

### MEDICAL RECORD

| Date     | Remarks                | Treatment | Cost |
|----------|------------------------|-----------|------|
| 15/07/26 | Vaccination and milpro |           |      |
|          |                        |           |      |
|          |                        |           |      |
|          |                        |           |      |
|          |                        |           |      |

#### PTS APPROVAL

| NAME | SIGN |
|------|------|
|      |      |
|      |      |
|      |      |
|      |      |

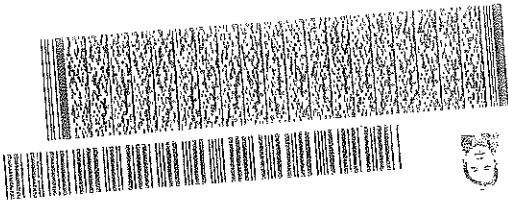


REPUBLIC OF SOUTH AFRICA  
NATIONAL IDENTITY CARD

Surname:  
STEYN  
Names  
MARGUERITE EVELYN  
Sex:  
F  
Nationality:  
RSA  
Identity Number:  
95002300072051  
Date of Birth:  
23 JUN 1995  
Place of Birth:  
RSA  
Citizen



108-8



111646535

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

Date of issue:  
02 OCT 2019



Please direct any queries to your Whitfields Customer Service Consultant, Tracy Vitale  
 Email : tracy@whitfields.co.za Telephone : +2710 824 5533

### TAX INVOICE/STATEMENT

| Registered Owner<br>D STEYN & M E STEYN<br>duanst13@gmail.com |           | Current Occupant/s<br>Owner Occupied | Invoice from: Hartland Lifestyle Estate<br>For your property/ies:<br>ERF 7932 Hartland Lifestyle Estate<br>Hartenbos<br>Hartenbos<br>Mosselbay 6520 | Date : 2026-08-01<br>Tax Inv No : HARTLAN7932A20260801<br>Scheme VAT No :<br>Owner VAT No : Not Applicable<br>Account No : HARTLAN7932A |           |
|---------------------------------------------------------------|-----------|--------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|-----------|
| Date                                                          | Reference | Property                             | Description                                                                                                                                         | Amount                                                                                                                                  | Balance   |
|                                                               |           |                                      | Opening Balance                                                                                                                                     |                                                                                                                                         | -1 883.15 |
| 2026-06-29                                                    | AFA-26-06 | CBR09713                             | Direct Deposit Received                                                                                                                             | -1 300.00                                                                                                                               | -3 183.15 |
| 2026-07-01                                                    | MFL-26-07 | Erf 7932                             | Levy                                                                                                                                                | 1 300.00                                                                                                                                | -1 883.15 |
| 2026-07-01                                                    | MFL-26-07 | Erf 7932                             | CSOS Levy                                                                                                                                           | 16.00                                                                                                                                   | -1 867.15 |
| 2026-08-01                                                    | MFL-26-08 | Erf 7932                             | Levy                                                                                                                                                | 1 300.00                                                                                                                                | -567.15   |
| 2026-08-01                                                    | MFL-26-08 | Erf 7932                             | CSOS Levy                                                                                                                                           | 16.00                                                                                                                                   | -551.15   |
|                                                               |           |                                      | Closing Balance                                                                                                                                     |                                                                                                                                         | -551.15   |
|                                                               |           |                                      | AMOUNT DUE BY: 2026/08/01                                                                                                                           | CREDIT:                                                                                                                                 | -551.15   |

**PAYMENTS**

- \* Pay to Hartland Lifestyle Estate, Standard Bank, Fourways Mall (051001), A/C No 023 345 586
- \* Use only your 12 digit account number as your payment reference
- \* Cash deposits are not accepted.

Whitfields offering for owners with tenants

- \* An owner with a tenant may request the splitting of their invoice so that charges relating to utilities are sent to their tenant.
- \* The owner will receive a copy of the utilities account that is sent to their tenant.
- \* Whitfields will follow up any unpaid utilities account as they would an unpaid levy account.
- \* An administration fee of R 30.00 per month including VAT shall be charged to the owner for this service.
- \* Contact your Customer Service Consultant to initiate this service.

**IMPORTANT NOTES**

- \* Levies and other charges are due and payable by no later than the 1st of every month. Interest will be charged on late payments.
- \* To request debit order payments, visit your scheme website or contact your Whitfields Customer Service Consultant.
- \* Payments made recently may not reflect on this invoice/statement.
- \* All payments are allocated first to interest, thereafter to the oldest debt.
- \* Failure to reference your payment correctly could result in fees which will be for your account.



## ANNEXURE A

### Additional household members and emergency contacts

#### 1. Spouse details

- Full name : Duan Marguerite Steyn
- Contact number : 0834545255
- Email address : mrsmargiesteyn@gmail.com or duanst13@gmail.com

#### 2. Additional family member/friend details

- Full name : John Curtain
- Contact number: 072 845 4393
- Email address : johnndcurtain@gmail.com

#### 3. Precious SPCA Adoption

- Have you previously adopted from SPCA (Yes/No) (No)
- 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

M Steyn

Date

6 Aug 2026



# MY OWNER

NAME **Marguerite Steyn**

POSTAL ADDRESS

STREET ADDRESS **19 Borgee Lane**

**Harare**

HOME PHONE

WORK PHONE

CELLPHONE **066 2390871**

EMERGENCY DETAILS

# ME

**CANINE**

**STX**

**WHITE + BROWN**

**FEMALE**



992003000650798

# NEXT VACCINATION DUE

DATE DATE

12/08/2026

# I WAS VACCINATED ON

DATE VACCINE AND BATCH NO. VET SIGNATURE

15/07/26

**Nobivac Puppy DP Plus**  
Batch: A267801  
Exp: 11-2027

*[Signature]*

# I WAS VACCINATED ON

DATE VACCINE AND BATCH NO. VET SIGNATURE

*[Faint text from reverse side of page, including 'Antimicrobial', 'Antiparasitic', etc.]*

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 owner 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. G2604 Act 36/1947), Nobivac® Canine-1 DAPPV (Reg. No. G3892 Act 36/1947), Nobivac® Feline-HCP (Reg. No. G3880 Act 36/1947), Nobivac® Tricat THe (Reg. No. G3712 Act 36/1947), Nobivac® Rabies (Reg. No. G2207 Act 36/1947), Quantel® Tablets (Reg. No. G2717 Act 36/1947) Contains Praziquantel (isoprodione) 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 504 mg pyrantel embonate) and Fenbendazole 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 Fenbendazole 525 mg. Bravecto® (Reg. No. G4093 Act 36/1947) each chew contains 25 mg Fluralaner per kg body weight.

## I WAS DEWORMED ON

| DATE     | PRODUCT | DATE | PRODUCT |
|----------|---------|------|---------|
| 15/07/06 | milpro  |      |         |

**Quantel**  
DEWORMING FOR HAPPY HEALTHY DOGS

**Exitel Plus**  
Exitel Plus XL

### 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 1 month 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 conditions 1 and 3 were met before the intended movement.

DATE

BY VETERINARIAN

SIGNATURE

PRACTICE STAMP

## CERTIFICATE OF STERILISATION

VETERINARIAN'S SIGNATURE

DATE

DOCTOR'S NAME

PRACTICE STAMP



Animal Health

Intervet South Africa (Pty) Ltd, Reg. No. 1991/006590/07  
20 Spartan Road, Spartan, 1619, RSA | Private Bag X2025, Isando, 1600, RSA  
Tel: +2711 923 5300, Fax: +2711 392 3158, Sales Fax: 086 603 1777

## VACCINE RECORD CARD

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



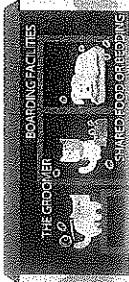
CONTAMINATED WATER

SHOES & CLOTHING

HOUSE GUESTS

VISITING PETS

THE ENVIRONMENT



PET'S NAME

(WAVE)

## GARDEN ROUTE SPCA

Bill Jeffery Avenue PO Box 258  
KwanonQaba George 6530  
Mosselbay 6506

Cell: 071 658 4832/Office: 044 693 0824  
Emergency No: 072 287 1761

### Consulting Hours

Mon - Fri: 09:00 - 16:00  
Saturday: 09:00 - 11:00

## MICROCHIPPED ANIMAL REGISTRATION FORM

### MICROCHIP NUMBER



992003000650798

### VET OR WELFARE ORGANISATION

Vet Practice Name \*

Vet Practice Number \*

Vet Practice Phone - Daytime \*

### PET OWNER INFORMATION

Cell No. \* 066 2390871

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

E-mail \* mrs margie steyn@gmail.com

Title \* Mrs Initials \* M

Surname \* STEYN

Street 19 BOEGOE LAAN

City

Suburb

Area Code HARTLAND

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 \* 12-08-2026

Date of Implant \* 05-08-2026

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

Name of Vet who implanted the Chip KAY LEUERS

### PET DETAILS

Pet Name

Date of birth

Species \* CANINE

Breed \* JACK RUSSELL X

Colour WHITE + BROWN

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

Medical Conditions

Medical Insurance Company

Medical Insurance Policy Number

Medical Insurance Phone

### PROTECTION OF PERSONAL INFORMATION LAW

The client hereby agrees that his / her personal information herein supplied and / or any of his / her personal information already in possession of the veterinarian may be processed by the said Veterinarian and / or it's office to bring about this agreement between the client and the veterinarian. The client further agrees that the veterinarian may forward his / her personal information to VIRBAC (Supplier of the Chip), in order for Virbac to lodge the clients personal information on their database for tracking purposes. The client also agrees that where other relevant institutions need to trace a lost animal, and they use that code on Virbac's website they will be given the personal information of the owner of said animal. The client also agrees that his / her personal information may be used by Virbac to forward him / her a Newsletter as well as to send him / her general information concerning pets. The client acknowledges that he / she has a right to object to the processing of its personal information for marketing purposes and unless expressly stated otherwise hereby consents to its personal information being used by \_\_\_\_\_ and Virbac RSA (Ltd) Pty for the above-mentioned purposes. SIGNATURE \_\_\_\_\_

### REGISTRATION PROCESS - Please use one of the following option to register on the backhome database

1. On-line Log onto [www.backhome.co.za](http://www.backhome.co.za). Complete the registration process.
2. By e-mail Scan and E-mail the completed form to [backhome@virbac.co.za](mailto:backhome@virbac.co.za) or [backhome.support.external@virbac.co.za](mailto:backhome.support.external@virbac.co.za)
3. By App Download the Virbac Backhome Africa App







REPUBLIC OF SOUTH AFRICA  
NATIONAL IDENTITY CARD

Surname:  
STEYN  
Names:  
MARGUERITE EVELYN  
Sex:  
F  
Race:  
RGA  
Identity Number:  
0500230970031  
Date of Birth:  
26 JUN 1995  
Place of Birth:  
RGA  
City:  
N12345



Signature  
*M Steyn*



111646535



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 90

Valid to 02 OCT 2019

Conditions





## STERILISATION CONTRACT

PLEASE READ CAREFULLY - THIS IS A LEGAL DOCUMENT

CONTRACT No. MA0373DATE: 06/05/20between Mosselbay SPCA

and

Name Marguerite SteynAddress 19 Boegoe Laan HartlandTelephone Numbers (H) 0662390871 (B)to have spayed / neutered / vasectomised (delete whichever is not applicable):Animal's Name \_\_\_\_\_ Sex Female Age 2 monthsDescription: OR XOn (due date) October end Adoption Form No. MA0373on 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: \_\_\_\_\_ For SPCA: \_\_\_\_\_

## CONFIRMATION OF STERILISATION:

Vet: \_\_\_\_\_ Signed: \_\_\_\_\_

Date: \_\_\_\_\_

