

T 1782

CONTRACT NO:  
MA 0386.

- ☒ Admission Form
- ☒ Application for adoption
- ☒ Pre-Home Inspection Report
- ☒ Adoption contract
- ☒ Copy of Identity Document or Driver's License
- ☒ Proof of Residence
- ☒ Letter from Body Corporate
- ☒ Sterilization Contract and Date of sterilization Contract End September
- ☒ Copy of Vaccination Record/ Certificate
- ☒ Microchip
- ☒ Microchip Registration- chip number \_\_\_\_\_

Account INFO:  
Name & Surname Jessica Du Preez  
Contact INFO: 018 852 6390

24/08/26  
992003000650495

Completed by: [Signature]

Date: 17/08/26

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



## ANNEXURE A

### Additional household members and emergency contacts

#### 1. Spouse details

- Full name : \_\_\_\_\_
- Contact number : \_\_\_\_\_
- Email address : \_\_\_\_\_

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

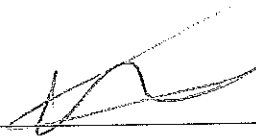
- Full name : Christian D. Pez
- Contact number: 081 337 0274
- Email address : Christianxox@gmail.com

#### 3. Precious SPCA Adoption

- Have you previously adopted from SPCA (Yes/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

\_\_\_\_\_

Date

13 / 08 / 26



# 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): Jessica Du Preez

HOME ADDRESS: Danabodge no 6 - Danabaaai

ID NO.: 8302270002084

POSTAL ADDRESS: \_\_\_\_\_

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

CELL NO: 078 8526390 FAX NO: \_\_\_\_\_

EMAIL: jessicadupreez@ymail.com

Address where animal will be kept: 6 Danabodge - Danabaaai

Occupation: Self employed

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

Are you a student with consent to keep pets: \_\_\_\_\_ YES/N

Reason for wanting animal: Emotional support.

Is the animal for yourself? \_\_\_\_\_ YES/N

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

What breed of dog or cat are you interested in? CAT

Can you afford private fees? yes Who is your vet? Dr Basson

How many animals live on the property? DOGS? 1 CATS? 1 OTHERS \_\_\_\_\_

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

Are all your animals sterilised? Give details No

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

Which animals do you still have, and what happened to the others? \_\_\_\_\_

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

Full description of the fencing and gate: Pallisade Height: 1.8m

What shelter is provided: OUTDOORS \_\_\_\_\_ KENNEL \_\_\_\_\_ OTHER Indoor

Have you previously had pets from an SPCA? yes Are there children under 10 in your household? yes

Pre Home Inspection Fee: 2100 Receipt No: 10901

**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 17/08



Garden Route

## ADOPTION CONTRACT

|                 |       |             |
|-----------------|-------|-------------|
| DOG / CAT       | Breed | Male/Female |
| Microc          |       |             |
| 992003000650495 |       |             |

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 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/Mvr/Mej (Insluitende voorletters):

HOME ADDRESS

WOONADRES: 6 Donalodge - Donkay

TEL No (H):

TELEFOON Nr (H):

CELL No:

SELFPOON Nr: 078 8526390

E-MAIL:

E-POS: jessicadupreez@xmail.com

ADOPTION FEE:

ANEMINGSVOOI:

VEHICLE REG No.

VOERTUIG REG Nr: CAW 101 298

SIGNATURE

ANDTEKENING:

DATE / DATUM:

17/08

ADMISSION No.  
TOELATINGSNR.

MA0386



Garden Route

## UITPLASINGSKONTRAK

|                                      |     |                |
|--------------------------------------|-----|----------------|
| HOND / KAT                           | Ras | Manlik/Vroulik |
| Mikroskyfie en of ID nSkyfie Nummer: |     |                |

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 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 befel 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.

Mrs Jessica Du Preez

ID/PASSPORT No.:

ID/PASPOORT Nr.: 8302270002084

(B):

(W):

FAX No:

FAKS Nr:

ADOPTION FEE:

ANEMINGSVOOI:

VEHICLE REG No.

VOERTUIG REG Nr: CAW 101 298

SIGNATURE

ANDTEKENING:

DATE / DATUM:

17/08

cash / eft / card

kontant / eft / kaart

DONATION:

DONASIE:

KWITANSIE Nr

RECEIPT No. 10901

VEHICLE REG No.

VOERTUIG REG Nr: CAW 101 298

VEHICLE MAKE:

VOERTUIG MAAK: GWM P-Series

COLOUR:

KLEUR: Blue

WITNESS FOR SOCIETY:

GETUIE VIR VEREENIGING:

MICROCHIPPED ANIMAL REGISTRATION FORM

MICROCHIP NUMBER



992003000650495

VET OR WELFARE ORGANISATION

Vet Practice Name \*

Vet Practice Number \*

Vet Practice Phone - Daytime \*

PET OWNER INFORMATION

Cell No. \* 07 88526390

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

E-mail \* jessicalupreez@ymail.com

Title \* Initials \*

Surname \* DU PREEZ

Street \* DANABODGE RD

City \* WESTERN CAPE

Suburb \* DANABAI

Area Code

Country

Province

Phone - Day time 078 852 6390

Phone - Night time

OTHER CONTACTS

Title \* Initials \*

Surname \*

Cell No. \*

Title \* Initials \*

Surname \*

Cell No. \*

Title \* Initials \*

Surname \*

Cell No. \*

CHIP DETAILS

Registration Date \* 24 - 08 - 2026

Date of Implant \* 17 - 08 - 2026

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

Name of Vet who implanted the Chip KAY LEVENS

PET DETAILS

Pet Name

Date of birth

Species \* FELINE

Breed \* DSH

Colour \* WHITE

Markings \* SPOT on NOSE

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 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

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

Virbac



# ADMISSION, ASSESSMENT AND HISTORY RECORD



Garden Route

|                          |                      |                             |          |
|--------------------------|----------------------|-----------------------------|----------|
| KENNEL No. <u>112</u>    |                      | ADMISSION No. <u>T 1782</u> |          |
| Stray                    | Surrender            | Abandoned                   | Returned |
| Impounded                | Confiscated          | Request for euthanasia      |          |
| Date In <u>30-7-2016</u> | Time In <u>15:14</u> | Date for release            |          |

|                                            |     |                         |            |                            |            |
|--------------------------------------------|-----|-------------------------|------------|----------------------------|------------|
| <b>IDENTIFICATION &amp; LOST AND FOUND</b> |     | Lost & Found checked    | Yes        | Lost & Found               | <u>N/A</u> |
|                                            |     |                         | No         | Date checked               |            |
| Microchip/Collar or ID tag found           | Yes | Date scanned or checked | <u>N/A</u> | Microchip or ID Tag number | <u>112</u> |
|                                            | No  |                         |            |                            |            |

|                                  |                                                 |                  |                                        |                     |                       |
|----------------------------------|-------------------------------------------------|------------------|----------------------------------------|---------------------|-----------------------|
| <b>DESCRIPTION &amp; HISTORY</b> | Dog                                             | Cat              | Other species (Specify)                |                     |                       |
|                                  | Breed                                           | <u>Doberman</u>  | Colour and Markings <u>Black / Tan</u> |                     |                       |
|                                  | Condition                                       | <u>Fair</u>      | Sex                                    | <u>Male</u>         | Age <u>10y old</u>    |
|                                  | Temperament                                     | <u>Fair</u>      | Sterilisation Details                  | <u>Yes</u>          | Name <u>Timber</u>    |
|                                  | Coat <u>Short</u>                               | Tail <u>Long</u> | Teeth Condition <u>Fair</u>            | Ears <u>Pricked</u> | Size <u>Small</u>     |
|                                  | Area found / collected from <u>FAH. RD</u>      |                  |                                        |                     | Date <u>30-7-2016</u> |
|                                  | Reason for surrender <u>Boxe dint - and cat</u> |                  |                                        |                     |                       |

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

|                     |                               |                        |
|---------------------|-------------------------------|------------------------|
| Surrendered by      | Name                          | <u>Zoe Bruinders</u>   |
| Found by            |                               |                        |
| Residential Address | <u>27.4 Dordrecht Str.</u>    |                        |
|                     | <u>FAH. E</u>                 |                        |
| Postal Address      |                               |                        |
| Tel (H)             | Tel (W)                       | Cell <u>0834454434</u> |
| Email               | <u>zoebruinder7@gmail.com</u> |                        |
| 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.

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>[Signature]</u> | Witness for Society <u>[Signature]</u> |
|------------------------------|----------------------------------------|

|                                         |                             |
|-----------------------------------------|-----------------------------|
| <b>FOR OFFICE USE: PENDING ADOPTION</b> | 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 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.

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.

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 and ID tag                                                                                   | Yes <input checked="" type="checkbox"/> | Microchip / |  |  |
| <br>992003000650495 |                                         |             |  |  |

Date 17/08/26

### MEDICAL RECORD

| Date     | Remarks            | Treatment | Cost |
|----------|--------------------|-----------|------|
| 05/08/26 | vaccinate + milpro |           |      |
|          |                    |           |      |
|          |                    |           |      |
|          |                    |           |      |
|          |                    |           |      |

#### PTS APPROVAL

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



ADOPTION No

MA0386

ADMISSION

T 1782

## PRE AND POST HOME INSPECTION FORM

PASSED: YES / NO

DATE UNDERTAKEN: 12 08 20

TIME:

NAME OF APPLICANT:

Jessica Du Preez

ADDRESS:

6 Danabridge, Danaburg

HOME TEL No:

CELL No: 078 88526390

ANIMAL(S) ADOPTING:

Litter

SEX:

♀

AGE:

9 weeks

## PRE- HOME INSPECTION:

| PROPERTY DESCRIPTION                         |                                                                       |                                       |                                                                       |
|----------------------------------------------|-----------------------------------------------------------------------|---------------------------------------|-----------------------------------------------------------------------|
| Type of fence:                               | DeleShades 1.8m                                                       | Height of fence:                      |                                                                       |
| 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      | Sheep head                                                            | Wrecker                                                               |                                                            |                                                            |                                                            |
| SEX        | F                                                                     | F                                                                     |                                                            |                                                            |                                                            |
| AGE        | 4y                                                                    | 1y                                                                    |                                                            |                                                            |                                                            |
| 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

PROPERTY APPROVED FOR THE FOLLOWING ANIMALS:

- ☒ SMALL DOGS  
☒ MEDIUM DOGS  
☐ LARGE DOGS

- ☒ CATS  
☐ EQUINE  
☐ OTHER (specify)

INSPECTED BY:

Christopher

SPCA:

Mosselbay

SIGNATURE:

## POST HOME INSPECTIONS

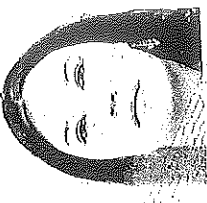
| DATE | RESULT | REMARK | BY WHOM |
|------|--------|--------|---------|
|      |        |        |         |
|      |        |        |         |
|      |        |        |         |

DIAGRAM OF PROPERTY ON REVERSE OF THIS PAGE





REPUBLIC OF SOUTH AFRICA  
NATIONAL IDENTITY CARD



Surname:  
DU PREEZ  
Names:  
JESSICA  
Sex:  
F  
Nationality:  
RSA  
Identity Number:  
8302270002084  
Date of Birth:  
27 FEB 1983  
Country of Birth:  
RSA  
Status:  
CITIZEN

Signature:



Conditions:

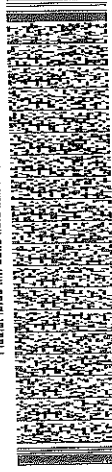
This card has been issued by the  
Department of Home Affairs in terms of the  
Identification Act, Act 68 of 1997  
If found please return to the Department of Home Affairs  
For enquiry or verification purposes contact 0800 60 11 30

Date of issue:  
23 MAY 2018

87433



107722921







Mossel Bay  
MUNICIPALITY

MOSSEL BAY MUNICIPALITY  
MOSSELBAAI MUNISIPALITEIT  
UMASIPALA WASEMOSSELBAYI

VAT REG. NO.  
Name:  
DU PREEZ J & C  
Street Address:  
6 DANALODGE DANABAI  
TAX INVOICE MONTHLY ACCOUNT

|                       |                 |
|-----------------------|-----------------|
| ACCOUNT NUMBER:       | 86-016803-007-1 |
| DATE OF ACCOUNT:      | 23/07/2026      |
| LAST RECEIPT DATE:    | 22/07/2026      |
| PREPAID METER NUMBER: | 01310929219     |
| SERVICE DEPOSIT:      | 2170.00         |
| ERF NUMBER:           | 16803000        |
| TOTAL VALUATION:      | 1300000         |
| WARD No:              | 11              |

| DATE       | DETAILS                                     | AMOUNT                |
|------------|---------------------------------------------|-----------------------|
| 21/07/2026 | B/F BALANCE                                 | 2013.52               |
| 21/07/2026 | 0131092921ELECTRICITY 05/06/2026-27/06/2026 | 538.92 *              |
|            | BASIC                                       | 468.63                |
|            | VAT/BTW                                     | 70.29                 |
| 21/07/2026 | NR11204907WATER 08/06/2026-08/07/2026       | 459.25 *              |
|            | 805 - 823 (18 Kl 30 Days)                   |                       |
|            | BASIC                                       | 276.56                |
|            | 07/26                                       | 1.38 @ 0.000 = 0.00   |
|            | 07/25                                       | 2.82 @ 10.611 = 29.92 |
|            | 07/25                                       | 4.54 @ 0.000 = 0.00   |
|            | 07/25                                       | 9.26 @ 10.030 = 92.87 |
|            | VAT/BTW                                     | 59.90                 |
| 21/07/2026 | 300011 REFUSE                               | 338.24 *              |
| 21/07/2026 | 400011 SEWERAGE                             | 385.72 *              |
| 21/07/2026 | RATES INSTALLMENT                           | 480.97                |
| 21/07/2026 | RECEIPTS                                    | 2013.00-              |
|            | Balance Carried Forward                     | 0.62-                 |
|            | VAT ON ITEMS:                               | 224.61                |
|            | ACE TOT:                                    | 0.00                  |

| CREDIT                                     | 60 DAYS | 30 DAYS | CURRENT | AMOUNT DUE |
|--------------------------------------------|---------|---------|---------|------------|
| 0.00                                       | 0.00    | 0.00    | 2203.62 | 2203.00    |
| PAYMENT MUST BE MADE ON OR BEFORE DUE DATE |         |         |         | 2203.00    |
| DUE DATE                                   |         |         |         | 17/08/2026 |



VAT No. / BTW Nr. 4830118370

101 Marsh Street  
Private Bag X 29  
MOSSEL BAY  
6500

(044) 606 5000  
(044) 606 5062  
admin@mosselbay.gov.za  
www.mosselbay.gov.za

Payment Details / Betaalings Besonderhede



Standard Bank  
PREDEFINED BENEFICIARY.  
MOSSEL BAY MUNICIPALITY  
REF NO. 860168030071



>>>>>>915268601680300712



11379 860168030071

Message / Boodskaap

Standard Bank is now the Primary banker for the  
MOSSEL BAY MUNICIPALITY.  
Municipal customers, service providers, members  
of the public and various stakeholders are therefore  
informed of the new banking partner for the  
MOSSEL BAY MUNICIPALITY.  
The municipality has been added as a predefined  
beneficiary on the Bank Directory.

Mossel Bay  
MUNICIPALITY



86-016803-007-1

DU PREEZ J & C  
6 DANALODGE  
DANA BAY  
6510

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

Vou en skêur af.

Fold and tear on perforation.



# MY OWNER

NAME

Jessica O. Perez

POSTAL ADDRESS

Danabodge 6

STREET ADDRESS

Danabodge 6

Danabodge

HOME PHONE

WORK PHONE

CELL PHONE

078 552 6390

PREPAYER DETAILS

ME

SPECIES

Feline

BREED

DSH

COLOR

White

SEX

Female

DATE OF BIRTH

DATE OF VACCINATION

992003000650495

REMARKS

## NEXT VACCINATION DUE

DATE

DATE

DATE

02/09/26

## I WAS VACCINATED ON

DATE

05/09/26

VACCINE AND BATCH NO.

VET SIGNATURE



*[Signature]*

## I WAS VACCINATED ON

DATE

VACCINE AND BATCH NO.

VET SIGNATURE

One of the best things you can do to give your dog 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's up to you to keep my vaccinations up to date as advised by my vet!

Nobivac® DHPPi (Reg. No. G2377 Act 36/1947), Nobivac® KC (Reg. No. G2504 Act 36/1947), Nobivac® Canine-1 DAPPV (Reg. No. G3892 Act 36/1947), Nobivac® Feline-HCP (Reg. No. G3880 Act 36/1947), Nobivac® Tricat Trio (Reg. No. G3712 Act 36/1947), Nobivac® Rabies (Reg. No. G2207 Act 36/1947), Quantel® Tablets (Reg. No. G2717 Act 36/1947) Contains Praziquantel (scofenolone) 50 mg/ml and Fenbendazole (benzimidazole) 500 mg/ml. Exitel Plus (Reg. No. G4226 Act 36/1947) Contains Praziquantel 50 mg, Pyrantel 50 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.



Animal Health

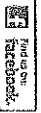
Quantel

Exitel Plus

Exitel Plus XL

Bravecto

facebook.com/BravectoSouthAfrica







## STERILISATION CONTRACT

PLEASE READ CAREFULLY - THIS IS A LEGAL DOCUMENT

CONTRACT No. MA 0386DATE: 17/08/2026

between

Mossel Bay SPCA

SPCA

and

Name

Jessica Du Plessz

Address

Danabodge No 6, Dordrecht

Telephone Numbers (H)

071 078 8526390078 8526390to have spayed / neutered / vasectomised (delete whichever is not applicable):

Animal's Name

Sex

Female

Age

19 Weeks

Description

Domestic Sheltie White

On (due date)

End September

Adoption Form No

MA 0386

on the understanding that you will arrange to have this done at the

Mossel Bay 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:

