

T 1658

- ☒ 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 _____

CONTRACT NO:
MA0388

C2

Access INFO:
Name & Surname Beanka-Lee van Staden
Contact INFO: 071 688 3856

21/08/26
992003000650493

Completed by: _____

Date: 21/08/26

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.

Collected

03 Black + white ♀

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): Mrs Beanka-lee van Staden

HOME ADDRESS: 25 E. Lanata Street, Dana Bay, 6501

ID NO.: 871119 0290 084

POSTAL ADDRESS: as above

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

CELL NO: 071 688 3856 FAX NO: _____

EMAIL: _____

Address where animal will be kept: 25 E. Lanata Street, Dana Bay, 6501

Occupation: Stay Home Wife

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

Are you a student with consent to keep pets: NA YES/NO

Reason for wanting animal: Company

Is the animal for yourself? YES/NO

Is the animal a replacement for a pet which has died from: Distemper/Parvovirus/Snuffles/Cat Flu/Biliary YES/NO

What breed of dog or cat are you interested in? any domestic

Can you afford private fees? yes Who is your vet? Heiderand Animal Clinic

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

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

Are all your animals sterilised? Give details NA

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

Which animals do you still have, and what happened to the others? died of old age

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

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

What shelter is provided: OUTDOORS _____ KENNEL _____ OTHER in doors

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

Pre Home Inspection Fee: R100 Receipt No: 10883

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 Beanka-lee van Staden Date of application 18/08/2020

ADMISSION No.
TOELATINGSNR.

MA0382



ADOPTION CONTRACT

Garden Route

DOG / CAT	Breed	Male / Female
Micro	992003000650491	

This animal has been given to you in the firm and confident belief that it will receive a good home with responsible and loving care. Ownership of an animal yields much pleasure and satisfaction. It also has its obligations and responsibilities. The fact that the animal has been in our care usually indicates that someone has, in the past, failed to recognise these responsibilities.

- I do hereby confirm and undertake that:
- I am over eighteen (18) years of age.
- All family members agree to the adoption and will abide by the conditions in the contract.
- I will not part with possession of the animal except to return it to the SPCA if for any reason I am unable to keep it. In the event that I fail to do so, I agree that I will be liable to pay to the SPCA all costs which they may incur in obtaining confirmation that the animal has been homed to a suitable person, with suitable premises. In the event that this is not the case, I also agree that I will be liable for all costs which the SPCA may incur, including all legal costs on an attorney and client scale, in recovering possession of the animal.
- I will give the animal a fair chance to adjust to its new home.
- I understand that donations are not refundable or transferable.
- I will feed and house the animal to the Society's satisfaction.
- I will not chain or cage the animal, and understand that if it is found chained or caged, it will be removed from my care immediately.
- I can afford the services of a private veterinary practitioner.
- I will ensure that vaccinations are kept up to date and in the case of injury or illness professional veterinary treatment will be provided.
- I understand that in case of illness (not injury) occurring within the first seven (7) days of adoption, I may bring the animal to the Society to be attended to by its veterinarian (at the discretion of the Society) at no charge to myself.
- I will ensure that the animal is sterilised as stipulated by the Society.
- I undertake to ensure that the animal has identification at all times, either in form of a microchip or a collar and tag - only elasticated or quick release collars may be used for cats.
- My property is adequately enclosed and at no time shall I knowingly allow my dog to roam the streets.
- I will notify the Society within forty-eight (48) hours should the animal die or go missing.
- I know and understand the "By-Laws pertaining to animals" of the Municipality in which I reside.
- I will permit an authorised officer of Society to visit my premises from time to time, to be assured that the animal is being treated in accordance with this Policy, and I will allow the Society to repossess the animal, if in the Society's opinion, the terms of this policy are not being reasonably adhered to.
- I will not use or allow the animal to be used as a watchdog on any industrial or commercial premises.
- I will notify the Society of any change of address in writing by registered post with seven (7) days.

* I agree to never harm, neglect, abuse or abandon the animal that I adopt.
* I confirm that I have never been convicted nor charged with cruelty or neglect of any animal.

I hereby declare that I have read through the Adoption Contract, and that I agree and acknowledge that the above contract is legal and binding.

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

HOME ADDRESS
WOONADRES:

TEL No (H):
TELEFOON Nr (H):

CELL No:
SELFOON Nr:

E-MAIL:
E-POS:

ADOPTION FEE:
AANEMINGSVOOI:

VEHICLE REG No.
VOERTUIG REG Nr:

SIGNATURE
HANDTEKENING:

DATE / DATUM:



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 kliënt 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 verdore 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.

Beanka - Lee van Staden

ID/PASSPORT No.:
ID/PASPOORT Nr.: 871119 029 0084

(B):
(W):

FAX No:
FAKS Nr:

DONATION:
DONASIE:

KWITANSIE Nr
RECEIPT No.

VEHICLE MAKE:
VOERTUIG MAAK:

COLOUR:
KLEUR:

WITNESS FOR SOCIETY:
GETUIE VIR VEREENIGING.

MICROCHIPPED ANIMAL REGISTRATION FORM

MICROCHIP NUMBER



992003000650493

VET OR WELFARE ORGANISATION

Vet Practice Name *

Vet Practice Number *

Vet Practice Phone - Daytime *

PET OWNER INFORMATION

Cell No. * 0716883856

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

E-mail *

Title * MRS Initials * B L

Surname * VAN STADEN

Street 25E LANATAA

City

Suburb

Area Code DANA BAY

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 * 21-08-2026

Date of Implant * 20-08-2026

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

Name of Vet who implanted the Chip LAT LEVERS

PET DETAILS

Pet Name

Date of birth

Species * FELINE

Breed * OSH

Colour TABBY

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 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 _____ 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. 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



STERILISATION CONTRACT

PLEASE READ CAREFULLY - THIS IS A LEGAL DOCUMENT

CONTRACT No. MA0382DATE: 21 Aug. 2020
 between Mosselbay and SPCA
Name Beanka - Lee van StadenAddress 25 E. Lanata Street, Dana BayTelephone Numbers (H) _____ (B) 071 688 3856to have ~~spayed~~ / neutered / vasectomised (delete whichever is not applicable):Animal's Name _____ Sex Female Age 9 weeksDescription Black + whiteOn (due date) End September Adoption Form No. MA0382on 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: Ben Staden For SPCA: [Signature]

CONFIRMATION OF STERILISATION:

 Vet: _____ Signed: _____
 Date: _____

ANNEXURE A

Additional household members and emergency contacts

1. Spouse details

- Full name : Gabriel van Stader
- Contact number : 082 411 0193
- Email address : gawie79@icloud.com

2. Additional family member/friend details

- Full name : Jacqueline van Zyl
- Contact number: 081 824 9301
- Email address : _____

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

Gabriel van Stader

Date

21 Aug. 2026

Mossel Bay

MOSSSEL BAY MUNICIPALITY
MOSSSELBAY MUNISIPALITEIT
UMASIPALA WASEMOSSSELBAYI

NO.

ST

REET

STRAAT DANABAY

FAKTUUR MAANDELIKSE REKENING

REKENINGNUMMER:

86-007968-002-8

DATUM VAN REKENING:

23/06/2026

LAASTE KWITTANSIE DATUM:

22/06/2026

VOORAFBETAALDE
METERNUMMER:

07614014780

RF
NUMMER: 7968000

TOTALE
WAGINGSIE: 2500000

VWK
NR: 11

BESONDERHEDE

BEDRAG

026 11.58	BALANS CORREKTING	3308.28
026 07614014780	RENT	3.69
026 07614014780	RENT	498.69

026 07614014780	BASIS	431.91
026 07614014780	VAT/BTW	64.78
026 07614014780	BASIS	419.16

026 07614014780	BASIS	261.39
026 07614014780	VAT/BTW	10.28
026 07614014780	BASIS	10.03

026 07614014780	BASIS	320.62
026 07614014780	VAT/BTW	365.61
026 07614014780	BASIS	1213.97

026 07614014780	BASIS	2923.28
026 07614014780	VAT/BTW	0.74
026 07614014780	BASIS	0.00

026 07614014780	BASIS	208.95
026 07614014780	VAT/BTW	0.00
026 07614014780	BASIS	0.00

026 07614014780	BASIS	0.00
026 07614014780	VAT/BTW	0.00
026 07614014780	BASIS	0.00

026 07614014780	BASIS	0.00
026 07614014780	VAT/BTW	0.00
026 07614014780	BASIS	0.00

026 07614014780	BASIS	0.00
026 07614014780	VAT/BTW	0.00
026 07614014780	BASIS	0.00

026 07614014780	BASIS	0.00
026 07614014780	VAT/BTW	0.00
026 07614014780	BASIS	0.00

026 07614014780	BASIS	0.00
026 07614014780	VAT/BTW	0.00
026 07614014780	BASIS	0.00

026 07614014780	BASIS	0.00
026 07614014780	VAT/BTW	0.00
026 07614014780	BASIS	0.00

026 07614014780	BASIS	0.00
026 07614014780	VAT/BTW	0.00
026 07614014780	BASIS	0.00

026 07614014780	BASIS	0.00
026 07614014780	VAT/BTW	0.00
026 07614014780	BASIS	0.00

026 07614014780	BASIS	0.00
026 07614014780	VAT/BTW	0.00
026 07614014780	BASIS	0.00



Mossel Bay
MUNICIPALITY



GABES TRUST
ERIKA STRAAT 16
DANA BAY
6510



Fold and tear on perforation.

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

je. nreys ue nov



REPUBLIC OF SOUTH AFRICA
NATIONAL IDENTITY CARD

NAME

MEHRA-LEE JHON
PASCAL BRANKON

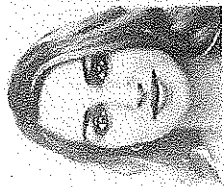
DOB

19 NOV 1987

ISS

2011

CITIZEN



[Signature]

	1970	1971	1972	1973	1974	1975	1976	1977	1978	1979	1980	1981	1982	1983	1984	1985	1986	1987	1988	1989	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033	2034	2035	2036	2037	2038	2039	2040	2041	2042	2043	2044	2045	2046	2047	2048	2049	2050	2051	2052	2053	2054	2055	2056	2057	2058	2059	2060	2061	2062	2063	2064	2065	2066	2067	2068	2069	2070	2071	2072	2073	2074	2075	2076	2077	2078	2079	2080	2081	2082	2083	2084	2085	2086	2087	2088	2089	2090	2091	2092	2093	2094	2095	2096	2097	2098	2099	2100	2101	2102	2103	2104	2105	2106	2107	2108	2109	2110	2111	2112	2113	2114	2115	2116	2117	2118	2119	2120	2121	2122	2123	2124	2125	2126	2127	2128	2129	2130	2131	2132	2133	2134	2135	2136	2137	2138	2139	2140	2141	2142	2143	2144	2145	2146	2147	2148	2149	2150	2151	2152	2153	2154	2155	2156	2157	2158	2159	2160	2161	2162	2163	2164	2165	2166	2167	2168	2169	2170	2171	2172	2173	2174	2175	2176	2177	2178	2179	2180	2181	2182	2183	2184	2185	2186	2187	2188	2189	2190	2191	2192	2193	2194	2195	2196	2197	2198	2199	2200	2201	2202	2203	2204	2205	2206	2207	2208	2209	2210	2211	2212	2213	2214	2215	2216	2217	2218	2219	2220	2221	2222	2223	2224	2225	2226	2227	2228	2229	2230	2231	2232	2233	2234	2235	2236	2237	2238	2239	2240	2241	2242	2243	2244	2245	2246	2247	2248	2249	2250	2251	2252	2253	2254	2255	2256	2257	2258	2259	2260	2261	2262	2263	2264	2265	2266	2267	2268	2269	2270	2271	2272	2273	2274	2275	2276	2277	2278	2279	2280	2281	2282	2283	2284	2285	2286	2287	2288	2289	2290	2291	2292	2293	2294	2295	2296	2297	2298	2299	2300	2301	2302	2303	2304	2305	2306	2307	2308	2309	2310	2311	2312	2313	2314	2315	2316	2317	2318	2319	2320	2321	2322	2323	2324	2325	2326	2327	2328	2329	2330	2331	2332	2333	2334	2335	2336	2337	2338	2339	2340	2341	2342	2343	2344	2345	2346	2347	2348	2349	2350	2351	2352	2353	2354	2355	2356	2357	2358	2359	2360	2361	2362	2363	2364	2365	2366	2367	2368	2369	2370	2371	2372	2373	2374	2375	2376	2377	2378	2379	2380	2381	2382	2383	2384	2385	2386	2387	2388	2389	2390	2391	2392	2393	2394	2395	2396	2397	2398	2399	2400	2401	2402	2403	2404	2405	2406	2407	2408	2409	2410	2411	2412	2413	2414	2415	2416	2417	2418	2419	2420	2421	2422	2
--	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	---

[illegible]



ADMISSION No

T1809

PRE AND POST HOME INSPECTION FORM

PASSED: ☒ YES

DATE UNDERTAKEN:

18/05/24

TIME:

12:23

NAME OF APPLICANT:

Beanka - Lee van Sladen

ADDRESS:

25 E. Kanata Street, Danaburg

HOME TEL No:

CELL No:

071 688 3856

ANIMAL(S) ADOPTING:

Kitten

SEX:

Female

AGE:

9 weeks

PRE- HOME INSPECTION:

PROPERTY DESCRIPTION			
Type of fence:	vibracore		Height of fence:
Any sign of Kennel/Shelter?	YES ☒ / NO ☐	Any sign of Chain/Runner?	YES ☐ / NO ☒
Is the front yard separated from the back?	YES ☐ / NO ☒	If yes, what partitioning?	
Any hazards? (pool, rubble, razor wire, etc)	YES ☒ / NO ☐	Specify:	
Does applicant live at the address?	YES ☒ / NO ☐	How many animals are on the property?	none

DESCRIPTION OF ANIMALS ON PROPERTY

	1	2	3	4	5
BREED					
SEX					
AGE					
STERILISED	YES ☐ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐

OTHER INFORMATION / COMMENTS

Pool is closed

PROPERTY APPROVED FOR THE FOLLOWING ANIMALS:

- ☐ SMALL DOGS
☐ MEDIUM DOGS
☐ LARGE DOGS

- ☒ CATS
☐ EQUINE
☐ OTHER (specify) _____

INSPECTED BY:

Christopher

SPCA:

Mossekay

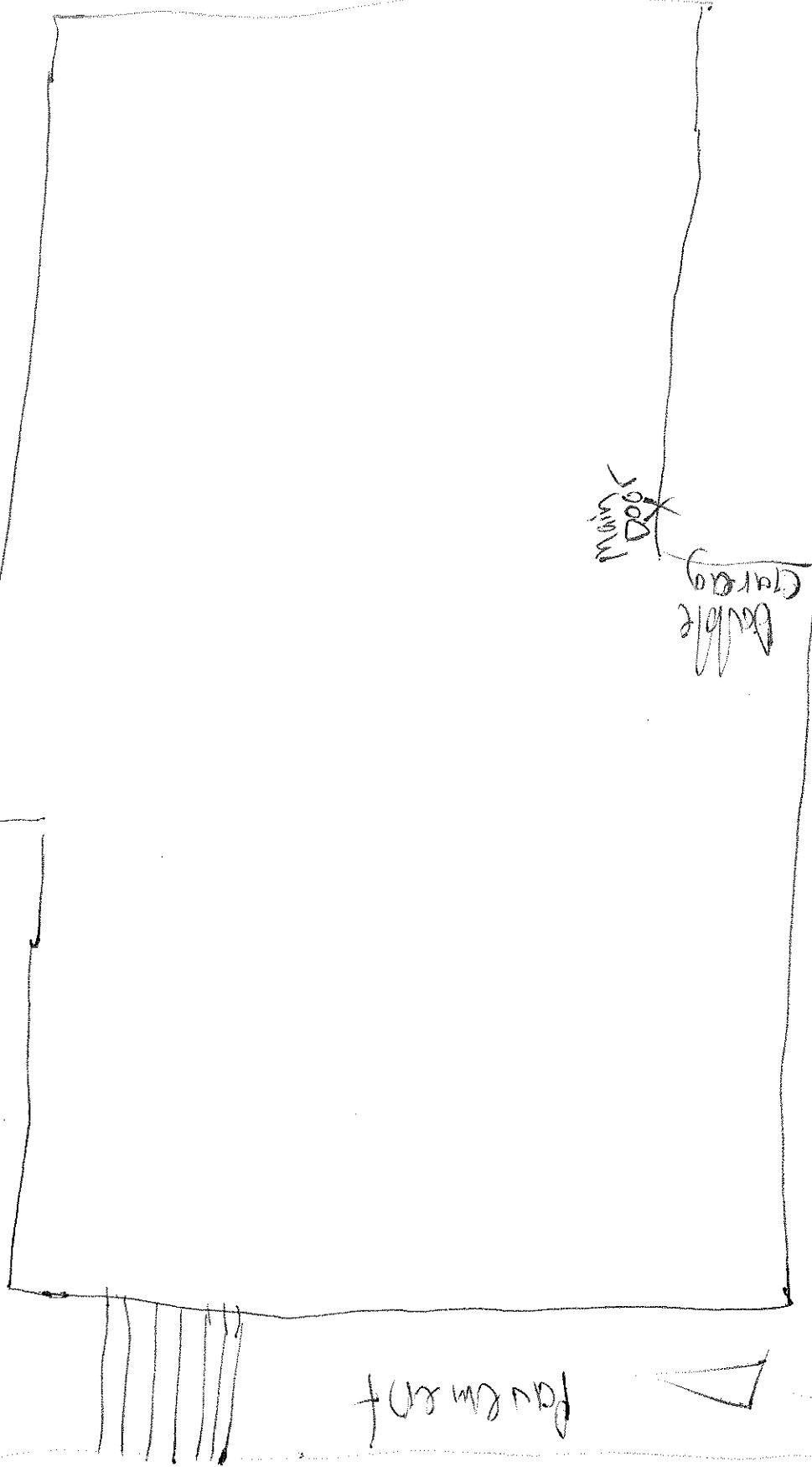
SIGNATURE:

POST HOME INSPECTIONS

DATE	RESULT	REMARK	BY WHOM

DIAGRAM OF PROPERTY ON REVERSE OF THIS PAGE

Grass Pool Grass



Pavement Drive way

Gravel

Pavement — Pavement —

Pavement

MY OWNER

NAME Beanka-Lee van Staden

POSTAL ADDRESS

STREET ADDRESS 25 E. Lonato Street

Dana Bay

HOME PHONE

WORK PHONE

TELEPHONE 071 688 3856

BREEDER DETAILS

ME

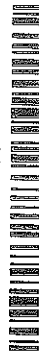
SPECIES Feline

BREED DSH

COLOR Black + White

SEX Female

DATE OF BIRTH



992003000650491

MSD ANIMAL HEALTH

FEATURES/MARKS

NEXT VACCINATION DUE

DATE DATE

10/09/26

I WAS VACCINATED ON

DATE VACCINE AND BATCH NO. VET SIGNATURE

05/08/26



[Signature]

I WAS VACCINATED ON

DATE

VACCINE AND BATCH NO.

VET SIGNATURE

One of the very best things you can do to give me a long and healthy life is to vaccinate me against common diseases. My mother gave me immunity during my first few weeks by disease-fighting antibodies in her milk. Now it'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. 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 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 (Isoquinoline) 50 mg/Tab and Fenbendazole (benzimidazole) 500 mg/Tablet, 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.

ADMISSION, ASSESSMENT AND HISTORY RECORD



Garden Route

KENNEL No. <u>CR3</u>				ADMISSION No. <u>T 1809</u>	
Stray	<u>Surrender</u>	Abandoned	Returned	Impounded	Confiscated
Date In <u>21/07/16</u>			Time In <u>12:32</u>	Date for release	Request for euthanasia

IDENTIFICATION & LOST AND FOUND			Lost & Found checked	Yes	Lost & Found Date checked
Microchip/Collar or ID tag found	Yes	Date scanned or checked	☒	No	<u>31/07/16</u>
	No				
				Microchip or ID Tag number	<u>None</u>

DESCRIPTION & HISTORY	Dog	<u>Cat</u>	Other species (Specify)		
	Breed	<u>DSH</u>	Colour and Markings <u>Black / white</u>		
	Condition	<u>fair</u>	Sex	<u>♀</u>	Age <u>kitten</u>
	Temperament	<u>friendly</u>	Sterilisation Details	<u>None</u>	Name
	Coat	Tail <u>long</u>	Teeth	<u>good</u>	Size <u>small</u>
	Area found / collected from	<u>street</u>	Ears	<u>up</u>	Date <u>31/07/16</u>
	Reason for surrender	<u>EX 13</u>			

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

Surrendered by	☒	Name	<u>Raydawn Bernardo</u>
Found by			
Residential Address	<u>91 Bernardo str</u>		
	<u>EX 13</u>		
Postal Address			
Tel (H)	Tel (W)	Cell	<u>51206824</u>
Email			
Donation R	Cash	Card	EFT (Receipt No.) <u>None</u>

PLEASE INSIST ON A RECEIPT

Confiscated: OB No: None Case No: None Inspector: Kuan

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 T1808</u>	Witness for Society <u>[Signature]</u>
FOR OFFICE USE: PENDING ADOPTION	
Details of first Applicant	Details of second Applicant
	Details of third Applicant

Claimed ☐ Adopted ☐ Euthanased ☐ Died ☐ Other ☐

On Date: _____

CONDITIONS / VOORWAARDES

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

REQUEST FOR EUTHANASIA

Owners authorising signature		Witness for Society signature	
Reason for Euthanasia			

Euthanase Bottle No: _____ Quantity used: _____ AWA: _____

CLAIMANT

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

Residential Address: _____

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

Postal Address: _____

Email Address: _____

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

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

Vehicle Model _____ Colour _____ Reg. No: _____

Signature: _____ Witness for Society _____

Microch and ID I	 992003000650491	Date <u>20/08/2026</u>
------------------	--	------------------------

MEDICAL RECORD

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

PTS APPROVAL

NAME	SIGN