

**MEET AND GREET
CONDUCTED: 24/07/26**

NSPCA Operations Manual 2026

SCOUT



Section 4-5B Page 1

Springes

ADMISSION NO

4418



PRE AND POST HOME INSPECTION FORM DOGS AND CATS

PASSED:



DATE UNDERTAKEN: *27/7/2026*

TIME: *13h30*

NAME and SURNAME OF APPLICANT: *Lesley Kerren Claassen*

ADDRESS: *52 2nd Street, Boksburg North*

GPS CO:ORDINATES:

HOME TEL No:

CELL No: *082 664 5487 / 084 925 0400*

ANIMAL APPLIED TO ADOPT: *Border Collie*

SEX: *Male*

AGE: *1/2?*

COLOUR: *White and Brown*

EXPECTED ADULT SIZE (Puppies): *S* *M/L* *XL*

Applicant Information	Yes	No	Notes
Does the applicant live at the address?	☒	☐	
Previous experience with dogs/cats?	☒	☐	Specify:
Who is your veterinarian?			<i>Boksburg Animal hospital</i>
Is there someone to care for the animal if unavailable?	☒	☐	Who: <i>Husband</i>
Are all household members in agreement?	☒	☐	
Are there children in the household?	☒	☐	Ages: <i>17 months</i>
How many hours per day will the animal be left alone?			<i>Not more than 2 hours</i>

Housing & Environment	Yes	No	Notes
Type and height of fence adequate?			<i>Well + - 6 ft</i>
Fence suitable (escape-proof)?	☒	☐	
Front yard separated from back?	☐	☒	If yes, how: <i>house</i>
Any hazards present?	☐	☒	Specify:
Safe when unsupervised?	☒	☐	
Property secure (gates/locks)?	☒	☐	
Any signs of chain/runner/cage?	☐	☒	
Adequate space for exercise?	☒	☐	

Shelter & Living Conditions	Yes	No	Notes
Suitable shelter provided?	☒	☐	Type: <i>Inside dogs & cat</i>
Shelter protected from the weather?	☒	☐	
Shelter clean and dry?	☒	☐	
Adequate bedding provided?	☒	☐	Type: <i>Blankets</i>
Is the animal allowed indoors?	☒	☐	
Sleeping area appropriate?	☒	☐	

Care & Management			
What food will be provided?	Type:	Dry Pellets - Wet food at night	
Food stored correctly?	✓		
Fresh water available at all times?	✓		
Exercise plan in place?	✓		
Grooming plan in place?	✓	When needed	
Parasite control in place?	✓		

Behaviour & Welfare Awareness			
Do they understand the basic care needs?	✓		
Aware of behavioural needs?	✓		
Understands breed-specific traits?	✓		
Plan for introducing a new pet?	✓		
Aware of signs of illness?	✓		
Willing to seek veterinary care?		✓	Reluctant to have JR checked

Animals: How many on the Property?					
SPECIES/BREED	Africanus	DST	JR		
COLOUR	Tan	White & Grey	White & Black		
BODY CONDITION	Good	Good	Fair		
WELFARE	Good	Good	No ^{see} complaints		
HEALTH	Yes	Yes	Gastro & Teeth		
WELL GROOMED	Good	Good	Good		
SEX	Female	Female	Male		
AGE	4-10y	7y	15yrs		
STERILISED	Yes	Yes	Yes		

• Welfare (i.e well cared for in general; handled well; responsible owners etc.)

If animals are not sterilized, what is the reason?	
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OTHER INFORMATION / COMMENTS	Reluctant to have JR teeth checked due to a gastro issue. Atrial Vet will FU
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INSPECTED BY: Ralph Chivavira SPCA: Boksburg SIGNATURE: [Signature]

POST HOME INSPECTIONS (to be undertaken three months after placement and yearly thereafter)

DATE	Microchip No Confirmed	COMMENTS	HOME SUITABLE	BY WHOM

DIAGRAM OF PROPERTY ON ANOTHER PAGE

CHARARUE