

ADMISSION, ASSESSMENT AND HISTORY RECORD

Cape of Good Hope



KENNEL No.			ADMISSION A 32513			
Stray	Surrender	Abandoned	Returned	Impounded	Confiscated	Request for euthanasia
Date in	21/08/2024		Time in	18:00	Date for release	

IDENTIFICATION & LOST AND FOUND			Lost & Found checked	Yes	Lost & Found Date checked
Microchip / Collar or ID tag found	Yes	Date scanned or checked	No	Microchip or ID tag number	
	No	22/8/24			

DESCRIPTION & HISTORY	Dog	Cat	Other species (Specify) W12-42 K				
	Breed	MIX		Colour and Markings	Tan		
	Condition	Underweight		Sex	M		
	Temperament	Friendly		Age	Adult		
	Coat	Tail	Teeth Condition	Ears	Size		
	S	L	Pair	SHOS	M		
	Area found/ collected from	RIVERLANDS - H.A.W.K				Date	21/08/2024
	Reason for surrender	CONFISCATION					

ASSESSMENT	
GOOD WITH	Yes No
Children	
Cats	
Other Dogs	
Livestock/ other	
DO THEY:	Yes No
Jump Fences	
Run Away	
COMMENTS	

Surrendered by	Name	H A W K
Found by		
Residential Address		
Postal Address		
Tel (H)	Tel (W)	Cell
Email		
Donation R	Cash	Card Eft Receipt No.

PLEASE INSIST ON A RECEIPT

Confiscated: OB No: **124/08/2024**

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 ~~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 if 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 nóg die DBV nóg sy amptenare, en werknemers enige verpligtinge het, teenoor my ten opsigte van die hantering van die dier/e nie. Ek bevestig dat ek bo die ouderdom van agtien (18) jaar is. **Sien ook die 'Voorwaardes' op die agterblad.**

Signature

Witness for Society

FOR OFFICE USE: PENDING ADOPTION

Details of first Applicant

Details of second Applicant

Details of third Applicant

Claimed ☐ Adopted ☐ Euthanased ☒

Died ☐

Other ☐

On Date:

22/8/24

CONDITIONS / VOORWAARDES

De of r

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 gee hiermee afstand van eienaarskap van die dier/e beskryf op die omgekeerde aan die DBV om meer te handel volgens hulle diskresie op die begrip dat die Vereniging sal poog om dit te plaas in 'n nuwe huis of, indien nie in staat om dit te doen, effek van sy pynloos vernietiging.

2. Indien, in die mening van 'n veearts of 'n gekwalifiseerde inspekteur in terme van Artikel 5 van Wet 71 van 1962 (Dierebeskermingswet) 'n dier wat aangebied word vir toelating wat so siek, ernstig beseer of in so 'n fisiese toestand is dat dit moet vir menslike redes vernietig word, die Vereniging die reg het om so 'n vernietiging te bewerkstellig deur goeiekeurde meslike metodes.

3. Enige koste aan gegaan hierop is verskuldig en betaalbaar op aanvraag.

4. Die Vereniging sal nie 'n dier plaas wat nie gesteriliseer is nie.

REQUEST FOR EUTHANASIA

Owners authorising signature

Witness for Society signature

Dr T. Gray

Reason for Euthanasia Poor welfare

Euthanase Bottle No: 631

Quantity used: 12ml

Name: [Signature] Signature: [Signature] Date: 22/8/74

CLAIMANT

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

Residential Address: _____

Tel No (H): _____ Tel No (W): _____ Cell No: _____

Postal Address: _____

Email Address: _____

Donation / Charge for animal: _____ Cash/Cheque/ Card (Receipt No.) _____

ID / Passport / Pension No: _____

Vehicle Reg. No: _____

Signature _____ Witness for Society _____

PTS checklist

- ☒ Collar matches form
- ☒ Vet's signature
- ☒ Breed Master's Signature
- ☒ Reason for PTS
- ☒ Lost & Found
- ☒ Scanned for microchip
- ☒ Spayed
- ☒ Breed
- ☒ Colour
- ☒ Sex
- ☒ Admission form completed in full?

AWA Initial/Sign: C. S. [Signature]

Microchip / Collar and ID tag given

Yes
No

Microchip or ID tag details

Date: _____

MEDICAL RECORD

Date	Remarks	Treatment	Cost
	37.6°C mm pink, Hyd ch H-BM		
	Old wounds on body UTC P.O.A		
	For Plan d Clotting		