ADMISSION, ASSESSMENT AND HISTORY RECORD

Cape of Good Hope

DBV SPCA

X-ray

KENNEL No.	6 C7	ADMISSION	A 32502

Stray	Surrender	Abandoned	Returned	Impounded	Confiscated	Request for euthanasia
Date in	21/08/24	Time in	18:00	Date for release		

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

DESCRIPTION & HISTORY

Dog	Cat	Other species (Specify)		
Breed	Mix Breed	Colour and Markings	Tan + White	
Condition	Poor	Sex	F	Age Adult.
Temperament	Fair	Sterilisation details		Name
Coat S	Tail L	Teeth Condition OK	Ears D	Size M
Area found/ collected from	RIVERLANDS - HAWK			Date 21/08/2024
Reason for surrender	CONFISCATED			

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

Surrendered by / Found by		Name	HANK.
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: 1201/08/2024 **Case No:** _____ **Inspector:** _____

STATEMENT OF SURRENDER

I do hereby **certify** that **I DO / I DO NOT** own the animal/s described above, that **IT IS / IT IS NOT** a stray and **I DO / I DO NOT** know where it comes from. I also freely surrender all interest, if, any therin to the SPCA and I request that the animal be dealt with as deemed advisible 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	WERNER

FOR OFFICE USE: PENDING ADOPTION	Details of second Applicant
Details of first Applicant	Details of third Applicant

Claimed ☐ Adopted ☐ Euthanased ☑ Died ☐ Other ☐ On Date: 21/08/24

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 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 gekawlifiseerde 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 vermietiging te bewerkstellig deur goegekeurde meslike metodes.

3. Enige koste aan gegaan hierop is verskulgig 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	Pain – PTS for welfare reasons		

Euthanase Bottle No: 642 Quantity used: 1.5ml

Name: Mitchell Signature: Date: 21/05/24

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 _____

Microchip / Collar and ID tag given		Yes / No	Microchip or ID tag details

Date: _____

MEDICAL RECORD

Date	Remarks	Treatment	Cost