

ADMISSION, ASSESSMENT AND HISTORY RECORD

Cape of Good Hope



Reg No. 1939/013624/08
FR. No. 0003-244 NPO

KENNEL No. LE2				ADMISSION No. A 50011		
Stray	Surrender	Abandoned	Returned	Impounded	Confiscated	Request for euthanasia
Date in	21/08/2024		Time in	14h00		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	AUG 2024		Microchip or ID Tag number 900250000345586

DESCRIPTION & HISTORY	Dog	Cat	Other species (Specify) W: 17.62kg		
	Breed	Kurky X		Colour and Markings	Black / brown
	Condition	old / junior		Sex F	Age old
	Temperament	ok		Sterilisation details	Name
	Coat M	Tail L	Teeth Condition	Ears D	Size M
	Area found / collected from Riverlands - HAWK				Date 21/08/2024
	Reason for surrender Confiscation				

ASSESSMENT			Surrendered by				Name	
GOOD WITH: Yes No			Found by					
Children			Residential Address		HAWK			
Cats								
Other Dogs			Postal Address					
Livestock/other			Tel (H)		Tel (W)		Cell	
DO THEY: Yes No			Email					
Jump Fences			Donation R		Cash	Card	EFT	(Receipt No.)
Run Away								
COMMENTS:								

PLEASE INSIST ON A RECEIPT

Confiscated: OB No: **1201/8/24** 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 (DO) / I 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 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 Rudi

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

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.

STRAY ANIMAL FEEDBACK CONSENT

Do you want updates on this animal if it is a stray?
YES / NO

Signature: _____

Date: _____

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 dien verstande dat die Vereniging 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 sleg, ernstig beseer of in sodanige fisiese toestand is dat dit vir menslikheidsredes vernietig behoort te word, die Vereniging 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 ongesterriliseer is nie.

I hereby confirm that I have read the conditions above and I understand and agree to the contents thereof.

Ek bevestig hiermee dat ek die voorwaardes hierbo gelees het en dat ek die inhoud daarvan verstaan en daartoe instem.

Signature: _____

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: _____

E-mail 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 / Collar
and ID tag given

Yes
No

Microchip/ ID
Tag details

Date: _____

MEDICAL RECORD

Date	Remarks	Treatment	Cost
21/08/24	T=39.2°C, mm pink, flat dk matted skin, Weak on Hind legs K.O.A	HBSPH VLC	
	grooming		
22/08/24	BAR, mm-pink, hyd-fair		
Danica	Eating and drinking well.		
	temp - 38.1		

HOSPITAL TREATMENT SHEET					
Owner Name and Surname		Animal name		Sex	M / F
Contact number		Breed		Sterilised	Y / N
Reason for treatment		Description		Weight	kg
		Admission Nr		Page Nr	

CLINICAL EXAMINATION ON ADMISSION			
Temp: Poor / Nil	Habitus:	Mucous Membranes:	Appetite: Good /
Vaccinated: Y / N	Vomiting: Y / N	Diarrhoea: Y / N / Bloody / Watery	Drinking: Y / N
Urinating: Y / N	Sterilised: Y / N	Last heat:	Skin:
Sneezing: Y / N	Coughing: Y / N	Eyes: Clear / Crusty / Watery	Ears: Clean / Dirty
Oral Cavity: Normal / Abnormal		Cardio-Vascular System: Normal / Abnormal	
Respiration: Normal / Abnormal	Genital: Normal / Abnormal	Locomotion/Musculoskeletal: Normal / Abnormal	

Diagnosis:

[illegible]

LEGEND: T = Temperature, A = Appetite (1-5), U = Urine (yes/no), F = Faeces (yes/no), H (Habitus) = Behaviour

TREATMENT RECORD	
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[illegible]

LEGEND: T = Temperature, A = Appetite (1-5), U = Urine (yes/no), F = Faeces (yes/no), H (Habitus) = Behaviour