

ADMISSION, ASSESSMENT AND HISTORY RECORD

Cape of Good Hope



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

KENNEL No. <u>5120</u>				ADMISSION No. A <u>50008</u>		
Stray	Surrender	Abandoned	Returned	Impounded	<u>Confiscated</u>	Request for euthanasia
Date in	<u>21/08/2024</u>		Time in	<u>18:00</u>	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	<u>Cat</u>	Other species (Specify)			
	Breed	<u>DSIT</u>			Colour and Markings	<u>Tabby</u>
	Condition	<u>Fair</u>			Sex	<u>F</u> Age <u>Adulte</u>
	Temperament	<u>Scared</u>			Sterilisation details	Name <u>/</u>
	Coat <u>S</u>	Tail <u>L</u>	Teeth Condition <u>good</u>	Ears <u>up</u>	Size <u>M</u>	
	Area found / collected from <u>Riverlands - HAWK</u>					Date <u>21/08/2024</u>
	Reason for surrender <u>Confiscation</u>					

ASSESSMENT			Surrendered by				Name <u>Hawk</u>							
GOOD WITH:			Yes	No	Found by									
Children					Residential Address									
Cats														
Other Dogs														
Livestock/other														
DO THEY:			Yes	No	Postal Address									
Jump Fences					Tel (H)				Tel (W)					
Run Away									Cell					
COMMENTS:							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 <u>I DO / I DO NOT</u> own the animal/s described above, that <u>IT IS / IT IS NOT</u> a stray and <u>I DO / I DO NOT</u> 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 hierbo beskryf <u>BESIT / NIE BESIT NIE</u>, dat dit 'n <u>RONDLOPER / NIE RONDLOPER NIE</u> is, en dat ek <u>WEET / NIE WEET</u> 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 diere 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 diere nie. Ek bevestig dat ek bo die ouderdom van agtien (18) jaar is. <u>Sien ook die 'Voorwaardes' op die agterblad.</u>
Signature	Witness for Society <u>Nicole</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: 22.08.24

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.

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 siek, 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 ongesteëliseer 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 <u>Snuffles</u>			

Euthanase Bottle No: 652 Quantity used: 7ml 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 _____ Reg. No: _____

Signature: _____ AWA Initial/Sign: _____ Witness for Society: _____

Microchip / Collar and ID tag given	Yes ☐ No ☐	Microchip/ ID Tag details	Date: _____
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MEDICAL RECORD

Date	Remarks	Treatment	Cost
21/8/24	FIV / FeLV (-ve)		
22/8/24	clinical Mm pink hydatid cat eyes slight BLS 0 key scario discharging, and not eat food	OK AOPV T38c	slight
	BLS → NAD	DX: snuffles	
	TIF 0	Recommnd	
	dewormo	for ethics	
	Tears 0 0		