

Sworn Affidavit

I Ayanda Ngcobe, hereby make oath and declare in English as follows:

1.

All facts herein contained are, except where otherwise stated, within my own personal knowledge and are both true and correct.

2.

I am employed at the Cape of Good Hope SPCA as an Inspector, situated at corner 1st Avenue and 1st Road, Grassy Park, Cape Town.

3.

I received a report of a horse overloaded with a Citroen C3 car on horse cart. I found the cart horse on the corner of 11th Avenue and Voortrekker Road, Kensington, Cape Town at approximately 14:33 on this day the 3rd September 2024. I stopped the driver who identified himself as Ambrose Sauls. He had three other people with him in the car that was on the cart that was attached to the horse. There were other scrap content inside the car. I immediately told the driver who is also the owner of the car to detach the cart and car from the horse as it is overloaded, he did so immediately.

4.

Whilst I was assessing the horse the other passenger walked off with the cart. I observed the horse walking and could see that it was struggling and lame. The horse, cart and car was seized. For contravening section 2 (1)(a) and 2 (1)(f) of the Animals Protection Act 71 of 1962 and taken into the custody of the SPCA.

A.N.C

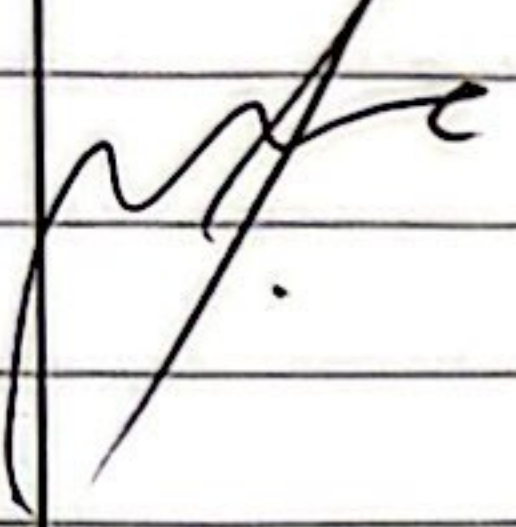
2

A1

S.

I know and understand the contents of this declaration I have no objection in taking the prescribed oath and I consider the oath to be binding on my conscience.

Inspector Ayanda Ngcofe



3/9/24



A1

PREAMBLE TO STATEMENT * AANHEF TOT VERKLARING

Station Stasie	<u>Versingen</u>	CAS no		MAS no		09, 2024		
PERSONAL PARTICULARS * PERSOONLIKE BESONDERHEDE								
Title Titel	<u>MRS</u>	Initials Voorletters	<u>A</u>	Surname Van	<u>NGCOPE</u>			
First names Voornam	<u>Amanda</u>							
Identity number Identiteitsnommer						Race Res	<u>A</u>	Br
Passport number Paspoortnommer						Country of issue Land van uitreiking		
Date of Birth Geboortedatum						Age Ouderdom		
Nationality Nasionaliteit						Citizenship Burgerskap		
I am/am not a member of the SAPS with PERSAL no * Ek is lid/nie lid van die SAPS met PERSAL no							<u>SPICA</u>	

RESIDENTIAL ADDRESS * WOONADRES						
Street name Straatnaam						
Building/farm/plot/place Gebou/plaas/plot/plek						
Suburb/Extension/Area Voorstad/Uitbreiding/Gebied						
Town/City Dorp/Stad			Postal Code Poskode			
Telephone number Telefoonnommer	Home Huis	Code	No	Work Werk	Code	No
Cellphone number Sellulêre foonnommer				Fax Faks	Code	No
ADDRESS-WORK/BUSINESS/INSTITUTION/ORGANISATION * ADRES-WERK/BESIGHEP/INSTANSIE/ORGANISASIE						
Name of Institution/Organisation Naam van Instansie/Organisasie	<u>SPCA - Cape of Good Hope</u>					
Street name Straatnaam	<u>1st Street & 1st Ave.</u>					
Building/farm/plot/place Gebou/plaas/plot/plek						
Suburb/Extension/Area Voorstad/Uitbreiding/Gebied	<u>Grassy Park</u>					
Town/City Dorp/Stad				Postal Code Poskode		
Telephone number Telefoonnommer	Home Huis	Code	No	Work Werk	Code	No
Cellphone number Sellulêre foonnommer			<u>083 6788460</u>	Fax Faks	Code	No
Would you like to receive information regarding this case via sms? Wil u inligting in verband met die saak ontvang per sms?				Yes / Ja No / Nee		

CONTACT PERSON (IF APPLICABLE) * KONTAK PERSOON (INDIEN VAN TOEPASSING)						
Title Titel		Initials Voorletters		Surname Van		
Telephone number Telefoonnommer	Home Huis	Code	No	Work Werk	Code	No
3/9/2024 Date/Datum						
Signature/Handtekening						Pa

SOUTH AFRICAN POLICE SERVICE



PART A1.....

STATEMENT

Station Kensington CAS no. 10912024

The following particulars in respect of the offence/incident is supplied:

PARTICULARS OF OFFENCE/INCIDENT																					
Date and time of offence/incident	0	3	0	9	2	0	2	4	-	1	4	3	3	Or	Period between					on	
														Day of week	Su	M	<u>T</u>	W	T	F	S

Description of Offence/Incident Animals Protection Act 71 of 1962 Section 2(1)(f)Method used/Entrance gained In possession, used Overloaded cart horse on public Road, in Contravention of 2(1)(a), 2(1)(f) of Act 71 of 1962.Type of instrument used Horse Cart and Car / Horse Cart

SCENE OF CRIME															
Between: Name of place															
and: Name of place															
or															
Street name	<u>Corner of 11th Avenue and Voortrekker Road</u>														
Building/farm/plot/place															
Suburb/Extension/Area	<u>Kensington</u>														
Town/City	<u>Cape Town</u>														
Geographical block no												Type of premises	<u>public Road</u>		
PLEASE INDICATE WHETHER THE <u>VICTIM</u> ☐ OR <u>ACCUSED</u> ☐ HAS ANY OF THE FOLLOWING															
Vision impairment (blind, partially sighted)						Hearing impairment (deaf or hard of hearing)									
Mental impairment (Down Syndrome, Epilepsy, Autism, Psychiatric)															
Physical impairment (Limping, using wheelchair or crutches, leg amputation, arm amputation)															
Albinism															
Multiple Disabilities	Specify if multiple														

03/04/2024
Date[Signature]
Signature

In case of theft of a vehicle the statement must be continued on form SAPS 3M(c).
In case of theft of a firearm the statement must be continued on form SAPS 3M(d).
In all other cases the statement must be continued on blank folio paper.

Investigating Officer

3 Sep 2024.

Date:

/ /

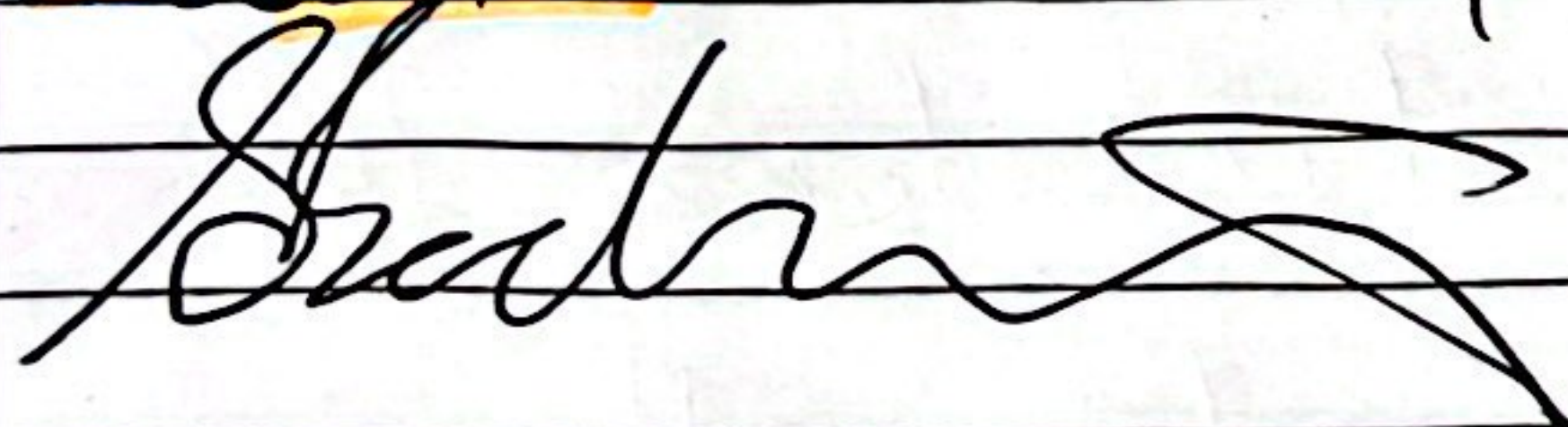
Please Get Written Statements
from suspects. ASAP, SPP will
refer the matter to me.

Please Can you take decision for
decision as soon as you can.

Thank you.

S. Badasine

Prosecutor - SPPA. / 081463 8029.



Today's mood:

☐

Craving coffee

☐

11/10

☐

Logging off

☐

Main character enemy

☐

BRR overthinking

☐

To unpack tomorrow:

TYPO

ATT: Public Prosecutor

Date: 3 Sep, 2024.

↳ Matter to be dealt with In ADR.
→

* Consultation with suspects:
↳ Extreme personal circumstances.
↳ Unemployed
↳ 3 children.
↳ Stay in informal settlement.
↳ Awareness of wrongdoing.
↳

* Interest of justice would be best
served / served by diversion.

Will assist with terms.

In the interim, I am going to make
a lost order as to seizure of horse.

S. Budasing

081 463 8029 / Insp supervisor@SPCA-CT.co.za.

Prosecutor for SPCA.

[Signature]

Thank You.

Today's mood:

☐

Craving coffee

☐

11/10

☐

Logging off

☐

Main character enemy

☐

BBB overthinking

☐

To unpack tomorrow:

TYPO

Particulars of accused Besonderhede van beskuldigde		No. 1	Surname Van
Christian names Voornam		AMBROS BRUE SAMUEL	
Identity number Identiteitsnommer		88112235120086	
Date of birth: Geboortedatum:		or age of oudedom	
Marital status Huwelikstaar		Occupation Beroep	
Place of birth Geboorteplek		Nationality Nasionaliteit	
Residential address Woonadres		Language Taal	
Business address Werkadres		Tel. No.	
Date and time arrested: Datum en tyd gearresteer:		SAPS 14 No.	
FP taken on: VA geneem op:		FP dispatched: VA versend:	
SAPS 69 received: SAPD 69 ontvang:		SAPS 69 Dispatched SAPD 69 Versend:	
FP No.: VA No.:		AY No. KR No.	
OB No. VB No.		(where person is charged/ waar persoon aangekla word)	
Date Datum		Time Tyd	

Particulars of accused Besonderhede van beskuldigde		No. 2	Surname Van
Christian names Voornam		LEE - ANNE	
Identity number Identiteitsnommer		93110190214094	
Date of birth: Geboortedatum:		or age of oudedom	
Marital status Huwelikstaar		Occupation Beroep	
Place of birth Geboorteplek		Nationality Nasionaliteit	
Residential address Woonadres		Language Taal	
Business address Werkadres		Tel. No.	
Date and time arrested: Datum en tyd gearresteer:		SAPS 14 No.	
FP taken on: VA geneem op:		FP dispatched: VA versend:	
SAPS 69 received: SAPD 69 ontvang:		SAPS 69 Dispatched SAPD 69 Versend:	
FP No.: VA No.:		AY No. KR No.	
OB No. VB No.		(where person is charged/ waar persoon aangekla is)	
Date Datum		Time Tyd	

FOR ADDITIONAL ACCUSED—SEE A
VIR BYKOMENDE BESKULDIGDES—SIEN A

Particulars of accused Besonderhede van beskuldigde No. 1		Surname Van
Christian names Voornam		SAULS
Identity number Identiteitsnommer		8812235120086
Date of birth: Geboortedatum: YY/JJ / MM / DD		or age of ouderdom
Marital status Huwelikstaal		Occupation Beroep
Place of birth Geboorteplek		Nationality Nasionaliteit
Residential address Woonadres		Standard of education Onderwyspel
Business address Werkadres		Language Taal
Date and time arrested: Datum en tyd gearresteer		SAPS 14 No.
FP taken on: VA geneem op: YY/JJ / MM / DD		FP dispatched: VA versend: YY/JJ / MM / DD
SAPS 69 received: SAPD 69 ontvang: YY/JJ / MM / DD		SAPS 69 Dispatched: SAPD 69 Versend: YY/JJ / MM / DD
FP No.: VA No.:		AY No. KR No.:
OB No. VB No.		(where person is charged/ waar persoon aangekla word)
Date Datum		Time Tyd

Particulars of accused Besonderhede van beskuldigde No. 2		Surname Van
Christian names Voornam		SAULS
Identity number Identiteitsnommer		8810190214084
Date of birth: Geboortedatum: YY/JJ / MM / DD		or age of ouderdom
Marital status Huwelikstaal		Occupation Beroep
Place of birth Geboorteplek		Nationality Nasionaliteit
Residential address Woonadres		Standard of education Onderwyspel
Business address Werkadres		Language Taal
Date and time arrested: Datum en tyd gearresteer		SAPS 14 No.
FP taken on: VA geneem op: YY/JJ / MM / DD		FP dispatched: VA versend: YY/JJ / MM / DD
SAPS 69 received: SAPD 69 ontvang: YY/JJ / MM / DD		SAPS 69 Dispatched: SAPD 69 Versend: YY/JJ / MM / DD
FP No.: VA No.:		AY No. KR No.:
OB No. VB No.		(where person is charged/ waar persoon aangekla is)
Date Datum		Time Tyd

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I know and understand the contents of this declaration I have no objection in taking the prescribed oath and I consider the oath to be binding on my conscience.

Inspector Ayanda Ngcofe

[Signature]

3/9/24

Hierdie dat bostaande verklaring deur my is en dat verklaarder erken dat hy sy vertroud is met die inhoud van hierdie ver- klaring en dit begryp. Hierdie verklaring is voor my bevestig en verklaarder se handtekening/merk/duimdruk is in my teen- woordigheid daarop aangebring.		I certify that the above statement was by me and that the deponent has admitted that he/she knows and understands contents of this statement. This statement was sworn to/affirmed before me and deponent's signature/mark/thumbprint was placed thereon in my presence.	
te KENSINGTON SAPS op 2024/09/03 om 17 : 55			
<i>[Signature]</i>			
(HANDTEKENING) KOMMISSARIS VAN EDE (SIGNATURE) COMMISSIONER OF OATHS			
M7. ABRAHAMS			
VOLLE VOORNAME EN VAN IN DRUKSKRIF FULL FIRST NAMES AND SURNAME IN BLOCK LETTERS			
133 STRAND STREET, CAPE TOWN			
BESIGHEIDSADRES (STRAATADRES) BUSINESS ADDRESS (STREET ADDRESS)			
LEO		SA POLISIEDIENS SA POLICE SERVICE	
RANG/RANK			

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1.

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MVA

A.NC