



APPLICATION TO ADOPT A DOG OR CAT

PLEASE NOTE: We retain the right to decline this application

The following documents are to be attached: ID, proof of residence, and proof that pets are allowed.

Prof/Dr/Mr/Mrs/Ms: NAME: Kristian Otto SURNAME: Aspesberger INITIALS: KA

HOME ADDRESS: Plaas Nooitgedacht, Vaaldam Road
Heidelberg, GP. ID NO.: 651225 5100 081

POSTAL ADDRESS: Same as above.

TEL NO (H): - (B): -

CELL NO: 0826005229 FAX NO: -

EMAIL: admin@lpees.co.za OCCUPATION: -

Address where animal will be kept: Plaas Nooitgedacht, Vaaldam Road

Reason for wanting an animal: Companionship

Do you own or rent your property: own Do you have consent from owner / Body Corporate? Yes

Are you a student with consent to keep pets? YES/NO

Is the animal for yourself? YES/NO

Is the animal a replacement for a pet which has died from: Distemper/Parvovirus/Snuffles/Cat Flu/Biliary YES/NO

Has there been any poisoning in your area or at your house recently? YES/NO

What breed of dog or cat are you interested in? Jack Russel

Can you afford private veterinary fees? Yes Who is your vet? Dr. Olivier

How many animals live on your property DOGS 1 CATS 0 OTHER 0

What are the sexes of your animals? DOGS: Male 1 Female 0 CATS: Male 0 Female 0

Are all your animals sterilised? Give details Yes Sterilized

How many dogs and cats have you owned over the past 3 years? DOGS 1 CATS 0 OTHER 0

Which animals do you still have, and what happened to the others? Still have all

Is your property fenced and has a proper gate? Yes Will you chain/cage an animal? No

Full description of the fencing and gate: Fully Fenced off Height: 1.8 Meters

What shelter is provided: OUTDOORS - KENNEL - OTHER Will sleep inside

Have you previously had pets from an SPCA? Yes Are there children under 10 years in your household? No

Pre Home-Inspection Fee: - Receipt No.: -

Declaration: The above information is true and correct

I confirm that I have never been convicted nor charged with cruelty or neglect of any animal.

SIGNATURE OF APPLICANT

DATE 24/07/2026

NAME & SURNAME (SPCA WITNESS) Thereza Muller

SIGNATURE: [Signature]