

ADMISSION, ASSESSMENT AND HISTORY RECORD

collected



KENNEL No. <u>HOSP</u>				ADMISSION No.		
Stray	Surrender	Abandoned	Returned	Impounded	Confiscated	Request for euthanasia ☒
Date in <u>16-04-26</u>		Time in		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	<u>bull terrier</u>		Colour and Markings	<u>black n white</u>	
	Condition	<u>fair</u>		Sex	<u>Male</u>	Age <u>3</u>
	Temperament	<u>aggressive</u>		Sterilisation details	<u>no</u>	Name <u>khokho</u>
	Coat <u>Short</u>	Tail <u>long</u>	Teeth Condition <u>good</u>	Ears <u>up</u>	Size <u>medium</u>	
	Area found / collected from <u>210 E. Mthlweni Section</u>					Date <u>16-04-26</u>
	Reason for surrender <u>aggressive bitten someone</u>					

ASSESSMENT			Surrendered by ☒	Name <u>khokho Nquengela</u>
GOOD WITH:	Yes	No	Found by	
Children			Residential Address	<u>210 E. Mthlweni Section</u>
Cats				
Other Dogs			Postal Address	
Livestock/other			Tel (H)	
DO THEY:	Yes	No	Tel (W)	
Jump Fences			Cell	<u>0682445602</u>
Run Away			Email	
COMMENTS:			Donation R	Cash Card EFT (Receipt No.)

PLEASE INSIST ON A RECEIPT

Confiscated: OB No:

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, 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 <u>M.L. Nquengela</u>	Witness for Society <u>[Signature]</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: 16/04/26

CONDITIONS VOORWAARDES

- | REQUEST FOR EUTHANASIA | | | |
|--|--------------------|-------------------------------|------------------------|
| Owners authorising signature | <i>[Signature]</i> | Witness for Society signature | |
| Reason for Euthanasia <i>often someone's open the cage</i> | | | |
| Euthanase Bottle No: | <i>April 6</i> | Quantity used: | <i>15ml</i> AWA: _____ |

CLAIMANT	
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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	Yes	Microchip/ ID	Date: _____
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Microchip, Serial and ID tag given	No	Tag details
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MEDICAL RECORD

[illegible]