

ADMISSION, ASSESSMENT AND HISTORY RECORD



Reserved N/W.

KENNEL No. <u>125</u>				ADMISSION No. <u>13560</u>		
Stray ☒	Surrender ☐	Abandoned ☐	Returned ☐	Impounded ☐	Confiscated ☐	Request for euthanasia ☐
Date in <u>15/04/22</u>			Time in <u>07:00</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 <u>13/04/22</u>	Microchip or ID Tag number	 900141000187377		

DESCRIPTION & HISTORY	Dog ☒	Cat ☐	Other species (Specify)			
	Breed	<u>Poodle x</u>		Colour and Markings	<u>Black</u>	
	Condition	<u>Good</u>		Sex	<u>Female</u>	Age <u>16 months</u>
	Temperament	<u>Good</u>		Sterilisation details	<u>No</u>	Name <u>Ella</u>
	Coat <u>Med</u>	Tail <u>Long</u>	Teeth Condition <u>Good</u>	Ears <u>Down</u>	Size <u>Small</u>	
	Area found / collected from <u>After hours kennels</u>					Date <u>13/04/22</u>
	Reason for surrender <u>unknown</u>					

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

FOR OFFICE USE: PENDING ADOPTION	
Details of first Applicant <u>N. Klipin</u>	Details of second Applicant
	Details of third Applicant

Claimed ☐ Adopted ☒ Euthanased ☐ Died ☐ Other ☐ On Date: 16/06/22



BRAKPAN SPCA
ADOPTION APPLICATION

DEPOSIT INVOICE #: _____

ADOPTION FEE INVOICE #: 9878

PLEASE NOTE: THIS IS A LEGAL DOCUMENT

R100 IS PAYABLE AS A NON-
REFUNDABLE DEPOSIT.

ONLY ONCE A DEPOSIT HAS BEEN PAID, THE ANIMAL YOU ARE APPLYING FOR WILL BE RESERVED.
WE RETAIN THE RIGHT TO TURN DOWN AND DENY THIS APPLICATION AT OUR OWN DISCRETION.

FOR OFFICE USE

EMAIL: _____ DATE: _____ TIME: _____
NOTES: Ella. Date: 25/05/22
Admission Form No: 13560
Kennel No: DS
Breed: Maltese x

PLEASE READ CAREFULLY AND ANSWER EVERY QUESTION ACCURATELY AND TRUTHFULLY.

IF YOUR APPLICATION IS INCOMPLETE, YOUR APPLICATION WILL BE DENIED.

IF THE ADOPTION PAYMENT HAS NOT BEEN MADE WITHIN 48 HOURS OF YOUR PROPERTY CHECK HAVING BEEN DONE, YOUR
APPLICATION WILL BE TERMINATED

Title: _____ Name and Surname: Natasha klipin Stay at home
Identity Number: 8108260275089 Occupation: mom/ lawyer
Residential Address: Unit c3 malaguena pentrich road
victory park johannesburg
Tel (Home): _____ Tel (Work): _____
Tel (Cell 1): 0836008586 Tel (Cell 2): _____
Email: Samuels.natasha@gmail.com

Do You Run A Business From Your Home: YES ☐ NO ☐

Is Your Property Properly Enclosed With A Fence / Wall: YES ☐ NO ☐

Height Of Fencing / Walling: Walled garden Type Of Fencing / Walling: _____

Do you have a swimming pool: YES ☐ NO ☐

Have You Previously Adopted From An SPCA: YES ☐ NO ☐

If YES, Which Branch: _____ When Did You Adopt From The SPCA: _____

What Breed Of Dog/Cat Are you Interested In: Little breed Ella

Who Are You Adopting The Animal For: Family companion

Reason For Wanting An Animal: Family companion

What Kind Of Food Will You Feed Your New Pet: Eukanuba or hills science

Will You Ever Chain A Dog: YES ☐ NO ☐

Will the animal be used for security purposes: YES ☐ NO ☐

How Many Pets Do You Currently Own:

Dogs: _____ Cats: _____ Other: _____

Details of Animals On Your Property:

(STERILISED ANIMALS ARE UNABLE TO HAVE PUPPIES / KITTENS)

BREED: <u>1 female</u>	M ☐	F ☐	STERILISED: YES ☐	NO ☐
BREED: <u>Chinese</u>	M ☐	F ☐	STERILISED: YES ☐	NO ☐
BREED: <u>crested</u>	M ☐	F ☐	STERILISED: YES ☐	NO ☐
BREED: _____	M ☐	F ☐	STERILISED: YES ☐	NO ☐
BREED: _____	M ☐	F ☐	STERILISED: YES ☐	NO ☐
BREED: _____	M ☐	F ☐	STERILISED: YES ☐	NO ☐

Have You Ever Owned An Animal Which Has Died From The Following?

Distemper / Gastro-Enteritis / Parvovirus / Snuffles / Biliary

YES ☐ NO ☐

Can Afford Private Veterinary Fees:

YES ☐ NO ☐

Who Is Your Current Veterinarian:

Craighall vet

What Happened To Any previous Pets You Have Owned?

DIED OF ILLNESS ☐ OLD AGE ☒ RUN AWAY ☐ GIVEN AWAY ☐ OTHER: _____

I Would Like The Animal To Sleep Outside	YES	NO
I Would like an affectionate animal	YES	NO
I would like an aggressive animal	YES	NO
I would like an animal that is good with other dogs / cats	YES	NO
I would like an animal that needs grooming:	DAILY	MONTHLY
I have experience with training	YES	NO
Someone is at home:	FULL DAY	HALF DAY
		SELF-GROOMING
		BASIC BEHAVIOUR
		NIGHTS & WEEKENDS

PLEASE NOTE:

- IF YOU LIVE IN A TOWNHOUSE / COMPLEX / RENTED PROPERTY, WE WILL REQUIRE A LETTER FROM YOUR BODY CORPORATE ALLOWING YOU PERMISSION TO ADOPT THE ANIMAL. NK Pls Initial
- CERTAIN BREEDS WILL REQUIRE A COMPATIBILITY TEST WITH THE PETS YOU CURRENTLY OWN. YOU WILL NEED TO BRING YOUR ANIMALS IN IF REQUESTED TO DO SO. NK Pls Initial
- WE WILL TRY OUR BEST TO CONDUCT YOUR PROPERTY CHECK WITHIN 48 HOURS BUT PLEASE UNDERSTAND THAT WE DO HAVE CRUELTY COMPLAINTS TO ATTEND TO, WHICH DO TAKE PREFERENCE. NK Pls Initial
- IN THE EVENT OF YOU LIVING IN AN AREA OUTSIDE OF BRAKPAN, WE CANNOT BE HELD RESPONSIBLE FOR THE TIME IT TAKES FOR YOUR LOCAL SPCA TO CONDUCT THE PROPERTY CHECK. NK Pls Initial
- THE DOCUMENTATION REQUIRED TO COMPLETE YOUR APPLICATION MUST BE SENT TO THE BRAKPAN SPCA WITHIN 48 HOURS OF SIGNING THE APPLICATION, FAILURE TO COMPLY WILL RESULT IN THE APPLICATION BEING CANCELLED. _____ Pls Initial

Owners Signature

Brakpan SPCA Witness

I.D. - Copy	☒ MUST SEND	PROOF OF RESIDENCE	☒ MUST SEND	Approval to own an animal (if Applicable)	☐ MUST SEND
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How Many Pets Do You Currently Own:

Dogs: _____ Cats: _____ Other: _____

Details of Animals On Your Property:

(STERILISED ANIMALS ARE UNABLE TO HAVE PUPPIES / KITTENS)

BREED: <u>1 female</u>	M ☐	F ☐	STERILISED: YES ☐	NO ☐
BREED: <u>Chinese</u>	M ☐	F ☐	STERILISED: YES ☐	NO ☐
BREED: <u>crested</u>	M ☐	F ☐	STERILISED: YES ☐	NO ☐
BREED: _____	M ☐	F ☐	STERILISED: YES ☐	NO ☐
BREED: _____	M ☐	F ☐	STERILISED: YES ☐	NO ☐
BREED: _____	M ☐	F ☐	STERILISED: YES ☐	NO ☐

Have You Ever Owned An Animal Which Has Died From The Following?

Distemper / Gastro-Enteritis / Parvovirus / Snuffles / Biliary

YES ☐ NO ☐

Can Afford Private Veterinary Fees:

Craighall vet

YES ☐ NO ☐

Who Is Your Current Veterinarian:

What Happened To Any previous Pets You Have Owned?

DIED OF ILLNESS ☐ OLD AGE ☒ RUN AWAY ☐ GIVEN AWAY ☐ OTHER: _____

I Would Like The Animal To Sleep Outside	YES	NO
I Would like an affectionate animal	YES	NO
I would like an aggressive animal	YES	NO
I would like an animal that is good with other dogs / cats	YES	NO
I would like an animal that needs grooming:	DAILY	MONTHLY
I have experience with training	YES	NO
Someone is at home:	FULL DAY	HALF DAY
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Owners Signature

Brakpan SPCA Witness

I.D. - Copy	☒ MUST SEND	PROOF OF RESIDENCE	☒ MUST SEND	Approval to own an animal (if Applicable)	☐ MUST SEND
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1

I.D. No. 810826 0275 089



S.A.CITIZEN

SURNAME

KLIPIN

FORENAMES

NATASHA LEE

COUNTRY OF BIRTH

SCOTLAND

DATE OF BIRTH

1981-08-26



DATE ISSUED

2012-02-21

ISSUED BY AUTHORITY OF
THE DIRECTOR-GENERAL
HOME AFFAIRS



Lease Agree...



THE LEASE AGREEMENT

LEASE AGREEMENT



This Lease Agreement will be entered into by and between the Owner and the Tenant as per the details below; the Agent hereby accepting the 3rd party benefits hereof:

SCHEDULE TO LEASE AGREEMENT:

1. THE PREMISES DETAILS (herein known as the "Premises") Full address (if Sectional Title please indicate unit number, door number and Scheme name):

Situated at:	C3, Malaguana, Penrith Road, Vicary Park, Jhb.				
Garage No.		Carport No.		Parking Bay No.	
SQ. No.		Utility Room No.		Other	
Furnished	NO	Cleaning Services		Smoking	NO
Pets Allowed	Only approved	Breed Chinese Crested		City	

2. THE OWNER/S (promising to be the sole "Landlord" or persons with the necessary Authority to let the Premises)

Name/Legal Name	Jamiella Pty Ltd	ID/Reg. Number	202/013323/07
Represented by	Jason Smith	ID Number	
Contact Number	082 945 7150 / 011 461 7818		
Email Address	jason@jamsale.com		
Name		ID Number	
Contact Number			
Email Address			

The Owner's nominated bank account	Account Name	Jamiella Pty Ltd
Bank	Account Type	Current
Reference: Malaguana	Branch Name/Code	580105
	Account Number	10011551024

3. THE TENANT/S

Name/Legal Name	JOSHUA KLEPIN	ID/Reg. Number	82 12 115 1000 81
Represented by		ID Number	
Contact Number	072 196 5961		
Email Address	josh.klepin@gmail.com		
Name		ID Number	
Contact Number			
Email Address			

4. OCCUPANTS OF THE PREMISES - (Please Note: No ID No.'s required for minors)

Full Name and Surname	JOSHUA KLEPIN	ID No/Passport No	82 12 115 1000 81
Full Name and Surname	NATASHA KLEPIN	ID No/Passport No	81 08 2602 7508
Full Name and Surname	NOAH KLEPIN	ID No/Passport No	
Full Name and Surname	DEBRA KLEPIN	ID No/Passport No	



attorney dealing with the matter.

From: cscham@global.co.za <cscham@global.co.za>
Sent: Sunday, 15 November 2020 13:51
To: Jason Smith <jason@jmsainc.com>
Cc: 'Ellis Falkof' <ellis@retailplus.co.za>; 'Brian Appleton' <briana@global.co.za>
Subject: RE: KEEPING OF A PET

Dear Jason

Provided the prospective tenants are aware of the rules regarding pets in the complex as per the existing Complex Rules and Regulations, there is no problem.

Please confirm that they are aware of the stipulations in Clause 13 of the Complex Rules and that a copy of the rules has been supplied to them as per Clause 9. Upon receipt of these confirmations, permission is granted.

Colin Schamroth,
Chairman
Trustees, Malaguena

From: Jason Smith <jason@jmsainc.com>
Sent: 15 November 2020 13:34
To: cscham@global.co.za
Cc: 'Brian Appleton' <briana@global.co.za>; 'Ellis Falkof' <ellis@retailplus.co.za>

13. PETS

- 13.1 Application to keep pets must be made in writing to the Trustees, which approval may not unreasonably be withheld.
- 13.2 Dogs must be leashed and properly controlled when on common property. The removal of excrement left on common property by pets shall be the responsibility of the owner concerned.
- 13.3 Animals are not allowed in the pool area.
- 13.4 Should a pet become a nuisance to other residents in the scheme, the Trustees reserve that right to withdraw the permission for keeping such pets in the complex.



ADMISSION NO

PRE AND POST HOME INSPECTION FORM DOMESTIC ANIMALS

PASSED: YES / NO

DATE UNDERTAKEN:

9/06/2022

TIME:

NAME OF APPLICANT:

ADDRESS:

HOME TEL No:

CELL No:

ANIMAL(S) ADOPTING:

SEX:

AGE:

PRE- HOME INSPECTION:

PROPERTY DESCRIPTION	
Type and height of fence: <u>Wall</u>	Suitability of fence (i.e. small pets can't escape): <u>Yes</u>
Suitable shelter? (i.e. Kennel in protected area)	YES ☒ / NO ☐
Is the front yard separated from the back?	YES ☐ / NO ☒
Any hazards? (pool, rubble, razor wire, etc)	YES ☐ / NO ☒
Does applicant live at the address?	YES ☒ / NO ☐
	Specify: <u>1</u>
	How many animals are on the property? <u>1</u>

DESCRIPTION OF ANIMALS ON PROPERTY

	1	2	3	4	5
BREED	<u>Poodle</u>				
CONDITION	<u>Good</u>				
WELFARE (good?)	<u>Good</u>				
SEX & AGE	<u>F / 16yrs</u>	<u>1</u>	<u>1</u>	<u>1</u>	<u>1</u>
STERILISED	YES ☒ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐

OTHER INFORMATION / COMMENTS

PROPERTY APPROVED FOR THE FOLLOWING ANIMALS:

☒ CATS☐ MEDIUM DOGS☒ SMALL DOGS☐ LARGE DOGS

INSPECTED BY:

Theo

SPCA:

Radberg

SIGNATURE:

[Signature]

POST HOME INSPECTIONS

DATE	RESULT	REMARK	BY WHOM

DIAGRAM OF PROPERTY ON REVERSE OF THIS PAGE



MALTESE X

6 mon

FEMALE

ELLA

:: ADDRESS ::

96 Denne rd,
Witpoort, Brakpan
www.brakpanspca.com
011 742 2007
adoptions@brakpanspca.co.za

Brakpan SPCA/DBV

ADOPT ME



KIDS DOGS CATS

IDENTIPET REGISTRATION FORM

SUCCESSFUL RECOVERIES DEPEND ON
ACCURATE AND COMPLETE INFORMATION

NB

900141000187377

Microchip Number

PLEASE COMPLETE ALL INFORMATION ACCURATE
OWNER INFORMATION

Mr / Mrs / Miss / Dr	N	Klipin
I.D Number 8108240275089		
Residential Address	Unit C3 Makgona Petrich Park Victory Park Johannesburg	
Home number	Work Number	0721965961
Cell Number	Alternative number	0830008586
E-mail address	Samuels.natasha@gmail.com	

Download the Identipet mobile App
from your Play / App store today.
Sign up to be part of our pet rescuer
network

Identipet
SINCE 1999

YOUR PETS INFORMATION

Type of Animal	Dog	Cat	Horse	Bird	Reptile	Game	Other Specify
Name of Animal				Breed	Maltese X		
Description / Colour	Black with white			Sex	M	F	
Sterilized	Y	N	Date of Birth		2021		

MICROCHIP IMPLANTER INFORMATION

Implanter Name	130616		Date of Implant	15/06/22
I certify that I have today implanted the above described animal in the prescribed implant site with the implant number as recorded above.		This implant carries a lifetime guarantee Registration is included free of charge		I accept the conditions of Sale
Microchip Implanter's Signature	12388		I agree to receive communication regarding Identipet services I agree to ensure that my details stays up to date See reverse for conditions of sale	Owner's Signature

Original copy - IDENTIPET	Second copy - IMPLANTER	Last copy - OWNER
Register online, email or Mobile App: www.identipet.com • Info@identipet.com Identipet, P.O. Box 215, Lanseria 1748 • Fax: (086) 671-9189 • Tel: (011) 957-3456		

Brakpan

Society for the Prevention Dierebeskermings- of Cruelty to Animals vereniging



Incorporated Association not for gain – Ingelyfde Vereniging sonder winsoogmerk
KENNELS/HOKKE: 96 DENNE RD/WEG, WITPOORT, BRAKPAN

Reg. No. 001-910 NPO

☑ 407
Brakpan
1540
☎ 011 742 2007
011 743 1076
083 696 9052

STERILISATION CONTRACT

ADOPTION ☒ ALIMONY ☐ OUTREACH ☐ MEDICAL ☐ CLAIMED ☐

DATE: 13/06/22

ADMISSION NUMBER: 13560

NAME & SURNAME: Natasha Klipin

ADDRESS: Unit C3, Malaguenia Pentrich Rd.
Victory Park, Randburg

CELL NUMBER: 083 600 8586 E-MAIL ADDRESS: _____

PET INSURANCE: YES / ☒ NO

DOG ☒ CAT ☐ BREED: Maltese AGE: ± 7 mon GENDER: F

NAME OF ANIMAL: Ella DESCRIPTION: Black with white FULLY VACCINATED: YES / ☒ NO

is your dog/cat pregnant? YES / ☒ NO is your dog/cat on heat? YES / ☒ NO ☒ SPAY / ☒ NEUTER

Does your dog/cat have vaginal discharge? YES / ☒ NO STERILISATION DATE: 13/06/22

HISTORY

Any prior procedure using anesthetic? If so, please give date and nature of procedure:

Any medical conditions (e.g. diabetes, epilepsy or problems with anesthetic)?

Any current medication? _____ Microchip: _____

TERMS & CONDITIONS OF STERILISATION

1. If the adopted animal is not sterilised on the due date mentioned above, the SPCA reserves the right to enter the above property and confiscate the animal. No money will be refunded.
2. The adopted animal cannot be passed on to a new owner. Please see clause 2 of the adoption contract.
3. The SPCA and its Veterinarian will not be held liable for any loss, theft, sickness, injury or death of any animal admitted for sterilisation. All reasonable precaution will be taken whilst the animal is in the SPCA's care. The SPCA does not have overnight staff to monitor animals after surgery.
4. It is understood that the signature on this document is that of the legal owner of the animal. Should it not be that of the legal owner, you are advised that you will have no legal recourse to take any action against the SPCA.
5. Failure to collect and pay the outstanding monies within (7) days of the animal's sterilization date shall result in the SPCA considering the animal to have been abandoned and they shall do with the animal as they deem fit. No further correspondence shall be entered into.
6. I understand that any procedure involving anesthetic does carry certain risks for the animal involved even though all reasonable precaution will be taken whilst the animal is in the care of the SPCA. I further understand that the SPCA Clinic is not equipped to deal with emergencies to the same extent as most private veterinary practices.
7. Should your dog/cat be found to be pregnant/on heat/pyometra during sterilisation, a MINIMUM of R300-00 surcharge will apply.
8. It is not a requirement that the BRAKPAN SPCA signs this contract for it to be effective and it will come into effect on the owner's/adopters signature.

I have read and fully understand the conditions above, which I accept unconditionally.

Signature of Owner/Adopter: _____

Brakpan

Society for the Prevention
Dierebeskermings-
of Cruelty to Animals
vereniging



Incorporated Association not for gain – Ingelyfde Vereniging sonder winsoogmerk
KENNELS/HOKKE: 96 DENNE RD/WEG, WITPOORT, BRAKPAN

Reg. No. 001-910 NPO

☑ 407
Brakpan
1540
011 742 2007
011 743 1076
083 696 9052

OFFICE USE ONLY:

WITNESS FOR SOCIETY: Ante

VET PRACTICE: Northmead

DATE: 13/06/22

VET USE ONLY:

VET NAME: Dr. McDonald

VET PRACTICE: NORTHMEAD VET CLINIC

VET SIGNATURE: M. A. M.

DATE: 13 June 2022

Mark Below Relevant

Mark Below If Relevant

☒ SPAYED / NEUTERED

☐ ON HEAT / PREGNANT / OTHER COMPLICATIONS (Describe under Notes)

NOTES: _____

BRAKPAN SPCA/MUNICIPAL POUND BRAKPAN DBV/MUNISIPALE SKUT

Tel: (011) 742-2007 / 743-1076 Fax: (011) 743-2196
P.O. Box 407 Brakpan 1540



ADMISSION No 13560

ADOPTION CONTRACT

UITPLASINGSKONTRAK

This animal has been given to you in the firm and confident belief that it will receive a good home with responsible and loving care. Ownership of an animal yields much pleasure and satisfaction. It also has its obligations and responsibilities. The fact that the animal has been in our care usually indicates that someone has, in the past, failed to recognise these responsibilities.

I do hereby confirm and undertake that:

- (1) I am over eighteen (18) years of age.
- (2) I will not part with possession of the animal except to return it to the SPCA if for any reason I am unable to keep it. In the event that I fail to do so, I agree that I will be liable to pay to the SPCA all costs which they may incur in obtaining confirmation that the animal has been home to a suitable person, with suitable premises. In the event that this is not the case, I also agree that I will be liable for all costs which the SPCA may incur, including all legal costs on an attorney and client scale, in recovering possession of the animal.
- (3) I will give the animal a fair chance to adjust to its new home.
- (4) I understand donations are not refundable or transferable.
- (5) I will feed and house the animal to the Society's satisfaction.
- (6) I will not chain or cage the animal, and understand that if it is found chained or caged it will be removed from my care immediately.
- (7) I can afford the services of a private veterinary practitioner.
- (8) I will ensure that vaccinations are kept up to date and in the case of injury or illness, professional veterinary treatment will be provided.
- (9) The pet I am adopting has received an initial vaccination and has been de-wormed by the Brakpan SPCA. I am satisfied with the current health status of the animal I am adopting. I understand that should the animal fall ill after being adopted, I will not hold the SPCA liable for any vet bills that may be incurred. If problems arise with the sterilisation wound of the animal, I may bring the animal to the Society to be attended to by its veterinarian at no charge to myself.
- (10) I will ensure that the animal is sterilised as stipulated by the Society.
- (11) I will identify my dog with a collar and identification tag - only elasticised collars must be used on cats.
- (12) My property is adequately enclosed and at no time shall I knowingly allow my dog to roam the streets.
- (13) I will notify the Society within forty-eight (48) hours should the animal die or go missing.
- (14) I know and understand the "By-Laws Pertaining to Dogs" of the Municipality in which I reside.
- (15) I will permit an authorised officer of the Society to visit my premises from time to time to be assured that the animal is being treated in accordance with this contract, and I will allow the Society to repossess the animal if in the Society's opinion, the terms of this contract are not being reasonably adhered to.
- (16) I will not use or allow the animal to be used as a watchdog on any industrial or commercial premises.
- (17) I will notify the Society of any change of address or telephone number in writing by registered post within seven (7) days.
- (18) I undertake to take all reasonable steps to maintain the animal in a good and healthy state and to ensure the animal has adequate food and water at all times. Should the animal be found at any time in a condition which the Society, or its representative, is of the view is not healthy, then the Society may forthwith repossess the animal.
- (19) I undertake to refrain from surgically altering any part of the animal's body other than for medical reasons. I understand that cropping ears and docking tails for cosmetic reasons is against the Law.
- (20) I agree that if I breach any of the above terms, the SPCA will have the right to enter upon my property and take repossession of the animal. I will then forfeit all rights and claims to the animal, and will have no right of action or recovery against the SPCA for any reason whatsoever.

Hierdie dier is aan u oorhandig met die vertroue dat u die dier 'n goeie tuiste sal bied, met verantwoordelike en liefdevolle sorg. Eienaarskap van 'n dier gee baie plezier en tevredenheid. Daar is ook verantwoordelikhed en verpligtinge wat nagekom moet word. Die feit dat hierdie dier in ons sorg was, dui gewoonlik daarop dat iemand hulle plig versuim het.

- (1) Ek ouer as agtien (18) jaar is.
- (2) Indien ek vir enige rede nie langer die dier kan versorg nie, onderneem ek om dit alleenlik aan die DBV terug te versorg. As ek om enige rede nie daartoe in staat is om die dier te hou nie sal ek nie besit van die dier afstaan nie tensy ek dit aan die DBV teruggee. Ingeval ek nie so optree nie, aanvaar ek aanspreeklikheid om alle onkoste aan die DBV te betaal wat hulle mag aangaan in die verkryging van bevestiging dat die dier by 'n geskikte persoon met aanvaarbare huis en erf gehuisves is. Ingeval dit nie die geval is nie, aanvaar ek ook aanspreeklikheid vir alle onkoste wat die DBV mag aangaan, insluitende die regsonekoste volgens 'n prokureur en klient skaal, in die terug verkryging van die dier.
- (3) Ek sal die dier 'n redelike kans gee om aan sy nuwe tuiste gewoon te raak.
- (4) Ek begryp dat donasies nie oordraagbaar is of terugbetaal word nie.
- (5) Ek onderneem om die dier te versorg en te huisves na die Vereniging se tevredenheid.
- (6) Ek sal nie die dier verskeiding of gehok hou nie, en aanvaar dat indien die dier wel in my besit verskeiding of gehok gevind word, die Vereniging dit dadelik sal versprei.
- (7) Ek kan die diens van 'n privaat veeartsenikondige bekostig.
- (8) Ek onderneem om die dier se nodige inentings op datum te hou en in die geval van siekte of beserings sal ek 'n veearts se dienste gebruik.
- (9) Die dier wat ek aanneem het die nodige inspillings en ontwormings ontvang en die toegedien deur die DBV. Ek is tevrede met die huidige status van die dier wat ek aanneem en ek verstaan dat as die dier siek word nadat ek die dier aangeneem het, dat ek nie die DBV vir enige rekeninge wat ek aangaan mag verantwoordelik hou nie. Sou die dier siek word as gevolg van die wond na sterilisasie, mag ek die dier na die DBV bring vir behandeling deur 'n veearts, die diens sal teen geen koste gelewer word.
- (10) Ek onderneem om toe te sien dat die dier gesteriliseer word soos deur die Vereniging voorgeskryf.
- (11) Ek onderneem om my hond te identifiseer met behulp van 'n halsband en naamplaatjie - slegs rektangulêre mag vir katte gebruik word.
- (12) My erf is behoorlik omhein en ek sal nie toelaat dat my hond in die straat rondloop nie.
- (13) Ek sal binne agt-en-veertig (48) uur die Vereniging in kennis stel indien die dier sterf of verlore raak.
- (14) Ek verstaan en erken die "Verordeninge Aangaande Honde" van die Munisipaliteit waarin ek woonagtig is.
- (15) Ek sal toelaat dat 'n gemagtigde persoon van die Vereniging my erf kan besoek van tyd tot tyd, om te verseker dat die dier wel versorg word soos in die Uitplasingskontrak uiteengesit is. Ek sal toelaat dat die Vereniging die dier in besit mag neem indien die beleid en reëls van die Uitplasingskontrak nie redelik nagekom word nie.
- (16) Ek sal nie die dier gebruik of toelaat dat die dier as 'n waghond gebruik word op enige industriële of kommersiële perseel nie.
- (17) Ek sal die Vereniging binne sewen (7) dae per geregistreerde pos in kennis stel van enige verandering van adres.
- (18) Ek onderneem om die dier in goeie gesondheid te hou en toe te sien dat die dier genoeg voedsel en water kry ten alle tye. Indien die dier teen enige tyd in 'n swak kondisie gevind word kan die Vereniging of sy verteenwoordiger die dier terugaanvaar.
- (19) Ek onderneem om geen gedeelte van die dier se liggaam chirurgies te laat verander anders as vir mediese redes nie. Ek verstaan dat die sny van ore en sterte vir kosmetiese redes teen die Wet is.
- (20) Ek stem hiermee toe dat as ek in gebreke is van enige van die bogenemde voorwaardes, sal die DBV dan geregtig wees om my eiendom te bekom, en die dier in my sorg terug te heel waarna ek geen reg tot enige aksie of eis teen die DBV vir enige rede hengevaar het nie.



900141000187377

ADOPTER/CLAIMANT

NAME-Prof/Dr/Mr/Mrs/Ms (including initials): Natasha Klipin

RESIDENTIAL ADDRESS: Unit C3, Malaguena Pentrich Rd
Victory Park, Randburg, Johannesburg.

RESIDENTIAL TELEPHONE No.: 083 600 8880

POSTAL ADDRESS: _____

BUSINESS ADDRESS: _____

BUS. TELEPHONE No.: _____

DONATION/CHARGE FOR ANIMAL: R1000

CASH/CHEQUE/CARD RECEIPT No.: 7878

ID/PASSPORT/PENSION No.: 208360375089

VEHICLE REG. No.: _____

SIGNATURE: _____

WITNESS FOR SOCIETY: _____

DATE: 15/06/22