ADMISSION, ASSESSMENT AND HISTORY RECORD

KENNEL No.	Boarding for Steri Boarding 3.			ADMISSION No.	14246	
Stray	Surrender	Abandoned	Returned	Impounded	Confiscated	Request for euthanasia
Date in	11/06/22		Time in	16h00	Date for release	

IDENTIFICATION & LOST AND FOUND						
Microchip / Collar or ID tag found	Yes / No	Date scanned or checked		Microchip or ID Tag umber	900141000187625	
Lost & Found checked	Yes / No	Lost & Found Date checked				

DESCRIPTION & HISTORY					
Dog ✓	Cat	Other species (Specify)			
Breed	JR		Colour and Markings	White with Brown	
Condition	Good		Sex	Male	Age ± 2 y
Temperament	fair		Sterilisation details	Tobe	Name Spikkels.
Coat S	Tail L	Teeth Condition fair	Ears		Size ✓
Area found / collected from					Date 11/06/22
Reason for surrender					

ASSESSMENT		
GOOD WITH:	Yes	No
Children		
Cats		
Other Dogs		
Livestock/other		
DO THEY:	Yes	No
Jump Fences		
Run Away		
COMMENTS:		

Surrendered by / Found by		Name	Rossouw Le Roux		
Residential Address	14 Linter weg Daggafontein Springs				
Postal Address	14 Linter weg Daggafontein Springs				
Tel (H)		Tel (W)		Cell	0863691620
Email	lerouxrossouw564@gmail.com				
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		Witness for Society	

FOR OFFICE USE: PENDING ADOPTION	Details of second Applicant
Details of first Applicant	Details of third Applicant

Claimed ☐ Adopted ☐ Euthanased ☐ Died ☐ Other ☒ R.T.O On Date: 23/06/22.

IDENTIPET REGISTRATION FORM

NB SUCCESSFUL RECOVERIES DEPEND ON ACCURATE AND COMPLETE INFORMATION

900141000187625

Microchip Number

PLEASE COMPLETE ALL INFORMATION ACCURATE

OWNER INFORMATION

Alimony 14246.

Mr / Mrs / Miss / Dr	R Le Roux
I.D Number	9903315132080
Residential Address	14 Kuitenweg Dassfontein Springs

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

Identipet SINCE 1989

Home number		Work Number	
Cell Number	084 369 1620	Alternative number	060 476 0600
E-mail address			

YOUR PETS INFORMATION

Type of Animal	Dog ✓	Cat	Horse	Bird	Reptile	Game	Other Specify

Name of Animal	Spikkels	Breed	Jack Russel
Description / Colour	Black white	Sex	M ✓ F
Sterilized	Y N	Date of Birth	07/2019

MICROCHIP IMPLANTER INFORMATION

Implanter Name	JOHN	Date of Implant	23/06/22.

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 agree to receive communication regarding Identipet services

I agree to ensure that my details stays up to date

See reverse for contitions of sale

I accept the conditions of Sale

John	12388.		R Roux
Microchip Implanter's Signature	Microchip Implanter's P.I.N Number		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

READY STEADY PRINT ☎ 011 025 0557

ADMISSION, ASSESSMENT AND HISTORY RECORD

DBV SPCA

KENNEL No. C2				ADMISSION No.		
Stray	Surrender	Abandoned	Returned	Impounded	Confiscated	Request for euthanasia
Date in	13/6/22		Time in	11:15	Date for release	

IDENTIFICATION & LOST AND FOUND						
Microchip / Collar or ID tag found		Yes / No	Date scanned or checked	13/6/22	Lost & Found checked	Yes / No, Lost & Found Date checked
					Microchip or ID Tagumber	N/A

DESCRIPTION OF DOG

Dog X	Cat	Other species (Specify)		
Breed	X Husky / Lab		Colour and Markings	Beige
Condition	good		Sex female	Age ± 5yrs
Temperament	good		Sterilisation details yes	Name Sheba
Coat med	Tail Long	Teeth Condition good	Ears up	Size large
Area found / collected from	24 Lester Rd			Date 13/6/22
Reason for surrender	The owner passed away			

ASSESSMENT

GOOD WITH:	Yes	No
Children	✓	
Cats		✗
Other Dogs	—	—
Livestock/other	—	—
DO THEY:	**Yes**	**No**
Jump Fences		✗
Run Away		✗

COMMENTS:

Surrendered by ✓					
Found by:	Name	Alta Nord			
Residential Address	24 Shepstone rd				
	Brenthurst Brakpa.				
Postal Address	Same as abov.				
Tel (H)	Tel (W)	Cell 082 385 0063			
Email					
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	Witness for Society
Akd.	John

FOR OFFICE USE: PENDING ADOPTION	Details of second Applicant
Details of first Applicant	Details of third Applicant

Claimed ☐ Adopted ☐ Euthanased ☐ Died ☐ Other ☐ _____ On Date: _____

BRAKPAN SPCA
ADOPTION APPLICATION

DEPOSIT INVOICE #: 10 000

ADOPTION FEE INVOICE #:

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: _____

Date: 08/07/22.

Admission Form No: 142604.

Kennel No: C2

Breed: Lab 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: MR. Name and Surname: DEWALD DE WET.

Identity Number: 7012315015 089 Occupation: SELF EMPLOYED.

Residential Address: 47 BUXTON STREET DALVIEW

Town: BRAKPAN

Tel (Home): _____ Tel (Work): _____

Tel (Cell 1): 083 611 7169 Tel (Cell 2): _____

Email: kleindandeef@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: 8 FEET. Type Of Fencing / Walling: WALL.

Do you have a swimming pool: YES ☑ NO ☐

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

If YES, Which Branch: NIGEL. When Did You Adopt From The SPCA: 2004 ±.

What Breed Of Dog/Cat Are you Interested In: LAB/HUSKY.

Who Are You Adopting The Animal For: DAUGHTER.

Reason For Wanting An Animal: PET FOR DAUGHTER.

What Kind Of Food Will You Feed Your New Pet: ROYAL CANIN/HILLS.

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: 5 **Cats:** _____ **Other:** _____

Details of Animals On Your Property:

(STERILISED ANIMALS ARE UNABLE TO HAVE PUPPIES / KITTENS)

BREED: HUSKY.	**M** ☐	**F** ☑	**STERILISED: YES** ☑	**NO** ☐
BREED: PUG.	**M** ☑	**F** ☐	**STERILISED: YES** ☑	**NO** ☐
BREED: PEKINGESE	**M** ☐	**F** ☑	**STERILISED: YES** ☑	**NO** ☐
BREED: PEKINGESE	**M** ☐	**F** ☑	**STERILISED: YES** ☑	**NO** ☐
BREED: PEKINGESE	**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: ST. FRANCIS.

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**	**SELF-GROOMING**
I have experience with training	**YES**	**NO**	**BASIC BEHAVIOUR**
Someone is at home:	**FULL DAY**	**HALF DAY**	**NIGHTS & WEEKENDS**

PLEASE NOTE:

1. **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.** D. **Pls Initial**
2. **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.** _____ **Pls Initial**
3. **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.** _____ **Pls Initial**
4. **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.** _____ **Pls Initial**
5. **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	

GEREGISTREERDE WOON- EN POSADRES

1. Bewaar die bewys van u GEREGISTREERDE WOON- EN POSADRES in hierdie sakkie.

2. Indien u van adres verander het, of indien besonderhede van u huidige adres, bv. straatnaam en/of -nommer, ens. verander het, moet die vorm KENNISGEWING VAN ADRESVERANDERING, wat in die sakkie agter in die identiteitsdokument is, gebruik word om die verandering aan te meld en moet dit ingedien word by of gepos word aan die naaste streek-/distrikkantoor van die DEPARTEMENT VAN BINNELANDSE SAKE.

REGISTERED RESIDENTIAL AND POSTAL ADDRESS

1. Keep the proof of your REGISTERED RESIDENTIAL AND POSTAL ADDRESS in this pocket.

2. If you have changed your address, or, if particulars of your present address, e.g. name of street and/or street number, etc., have been changed, the NOTICE OF CHANGE OF ADDRESS form in the pocket at the back of the identity document must be used to report the change and it must be handed in at or posted to the nearest regional/district office of the DEPARTMENT OF HOME AFFAIRS.

1

I.D.No. 701231 5015 08 9

S.A.BURGER/S.A.CITIZEN

VAN/SURNAME

DE WET

VOORNAME/FORENAMES

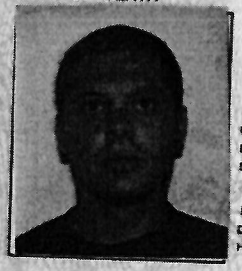
DEWALD

GEBOORTEDISTRIK OF-LAND/
DISTRICT OR COUNTRY OF BIRTH

SUID-AFRIKA

GEBOORTEDATUM/
DATE OF BIRTH

1970-12-31



DATUM UITGEREIK
DATE ISSUED

1999-03-08

UITGEREIK OP GESAG VAN DIE
DIREKTEUR-GENERAAL:
BINNELANDSE SAKE

ISSUED BY AUTHORITY OF THE
DIRECTOR-GENERAL:
HOME AFFAIRS

www.ekurhuleni.gov.za

City of Ekurhuleni

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Siyakhokha Portal
siyakhokha@ekurhuleni.gov.za
2022/07/08 11:50:26

Phone: 0860 543 000
Email:
callcentre@ekurhuleni.gov.za
Twitter: @EMM_Call_Centre

COPY TAX INVOICE

VAT Reg No. 4280193493

Invoice Number:
34015777712022/06/16

Name	D & D A DE WET			Account Number	3401577771	
Ward Number	105	Payments Included Until		2022-06-16	Vat Reg. No.	

Street Address	Electricity / Water Deposit		Statement Date
	Cash	Guarantee	
47 BUXTON	800.00	0.00	2022-06-16

Township	Valuation		
	Site	Improvements	Total Value
DALVIEW		1300000	1300000

ERF Number	H24 000 00000741	Portion	00000 0000 0000	Area m2	967

Date	Icon	Details	Charge (excl. VAT)	VAT	Charge (incl. VAT)
05/17		BALANCE BROUGHT FORWARD	3965.31		3965.31
06/13		PAYMENT - THANK YOU	-2000.00		-2000.00
06/15		PAYMENT - THANK YOU	-2000.00		-2000.00
		SUB TOTAL	-34.69		-34.69
		PROPERTY RATES			
06/16		PROPERTY RATES RESIDENTIAL	1139.63		1139.63
06/16		VA-VALUE-EXCLUSION	-131.50		-131.50
		ELECTRICITY SERVICE			
06/16		METER-NO 521240000 TARIFF: ELB-RESIDENTIAL 230/			
		Curr = 94395 Prev = 93996 Cons = 399			
		Reading dates: Curr 22/05/20 Prev 22/04/22			
		399.000 kWh	932.10	139.82	1071.92
06/16		FIXED CHARGE	52.00	7.80	59.80

30 Days	60 Days	90 Days	90 + Days	Total Charge (excl.VAT)	Total VAT	Total Charge (incl.VAT)
0.00	0.00	0.00	0.00	3431.57	368.73	3800.30

Amount In Advance	0.00	Due Date	2022-07-15	Amount Payable	3801.00

MESSAGE

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PAY NOW
CLICK TO CONTINUE...

REMITTANCE ADVICE

VAT Reg No. 4280193493

402

3401577771

EasyPay
"a better way to pay"

> >>>>>> 9 1337 3401 5777 711

3401577771

payA

115443401577771

Name
D & D A DE WET

Account Number
3401577771

Due Date	Amount Payable
2022-07-15	3801.00

www.ekurhuleni.gov.za

City of Ekurhuleni

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siyakhokha@ekurhuleni.gov.za
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COPY TAX INVOICE

VAT Reg No. 4280193493

Invoice Number:
34015777712022/06/16

Name	D & D A DE WET			Account Number	3401577771	
Ward Number	105	Payments Included Until		2022-06-16	Vat Reg. No.	

Street Address	Electricity / Water Deposit		Statement Date
	Cash	Guarantee	
47 BUXTON	800.00	0.00	2022-06-16

Township	Valuation		
	Site	Improvements	Total Value
DALVIEW		1300000	1300000

ERF Number	H24 000 00000741	Portion	00000 0000 0000	Area m2	967

		REFUSE REMOVAL			
06/16		BASIC REFUSE	186.62	27.99	214.61
		WATER SERVICE			
06/16		METER-NO 171110890 TARIFF: WATER-RESIDENTIAL			
		Curr = 2588 Prev = 2554 Cons = 34			
		Reading dates: Curr 22/05/20 Prev 22/04/22			
		WATER 34 kl	919.70	137.96	1057.66
		SEWERAGE			
06/16		SEWER 34 kl	367.71	55.16	422.87
		TOTAL CURRENT LEVY 3834.99			

30 Days	60 Days	90 Days	90 + Days	Total Charge (excl.VAT)	Total VAT	Total Charge (incl.VAT)
0.00	0.00	0.00	0.00	3431.57	368.73	3800.30

Amount In Advance	0.00	Due Date	2022-07-15	Amount Payable	3801.00

MESSAGE

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City of Ekurhuleni

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PAY NOW
CLICK TO CONTINUE...

REMITTANCE ADVICE

VAT Reg No. 4280193493

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3 4 0 1 5 7 7 7 7 1

EasyPay "a better way to pay"

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blu PAY

3401577771

pay@

115443401577771

Name
D & D A DE WET

Account Number
3401577771

Due Date	Amount Payable
2022-07-15	3801.00

EMERGENCY PHONE NUMBERS	
Municipal Services Complaints Call Centre (Non-Life Threatening)	**Life Threatening Emergencies**
0860-543 000	**011 458-0911 / 10177**
Electricity supply Water & Sewerage supply Roads, Transport & Civil Works Health & Social Development Environment, Solid Waste & Parks	All Fires Emergency Medical Assistance Metro Police Incidents / Disasters

IMPORTANT NOTICE

1. FINAL NOTICE

FINAL NOTICE ISSUED IN TERMS OF SECTION 12.(1) OF THE ELECTRICAL SUPPLY BY-LAWS IN RESPECT OF CURRENT ACCOUNT AND DEBT BALANCE BROUGHT FORWARD.
FAILURE TO PAY THE AMOUNT PAYABLE BEFORE DUE DATE, MAY RESULT IN ELECTRICITY SUPPLY BEING DISCONNECTED WITHOUT ANY FURTHER NOTICE. PRESCRIBED FEE FOR DISCONNECTION AND RECONNECTION SHALL BE CHARGED AND YOUR DEPOSIT MAY BE INCREASED. IMMEDIATE RECONNECTION OF SUPPLY AFTER PAYMENT CANNOT BE ASSURED.

PRE-PAID ELECTRICITY - IN THE EVENT THAT MUNICIPAL ACCOUNT IS IN ARREARS, PURCHASE OF PRE-PAID ELECTRICITY WILL BE BLOCKED ON VENDING SYSTEM UNTIL ALL ARREARS HAVE BEEN SETTLED IN FULL OR A SUITABLE ARRANGEMENT TO SETTLE THE

2. ALLOCATION OF PAYMENTS

PART PAYMENT OF YOUR ACCOUNT WILL BE ALLOCATED IN THE PRIORITY ORDER AS DETERMINED BY THE EKURHULENI METROPOLITAN MUNICIPALITY FROM TIME TO TIME

3. DEPOSITS

CONSUMER DEPOSITS ARE NOT TRANSFERABLE.

4. FINALREADING

FINAL READING REQUESTS MUST BE APPLIED FOR IN WRITING AT LEAST 7 DAYS PRIOR TO PROPERTY BEING VACATED OR TERMINATION DATE.

5. CHEQUE PAYMENTS

CHEQUE PAYMENTS MUST BE PLACED IN CHEQUE DEPOSIT BOXES AT CUSTOMER CARE CENTRE.
RECEIPTS WILL NOT BE FORWARDED WHEN PAYMENTS ARE MADE BY CHEQUE. PAID CHEQUE WILL BE ACKNOWLEDGED AS RECEIPT OF PAYMENT.

DISHONORED CHEQUE PAYMENTS - ADMIN FEE WILL BE LEVIED AND CREDIT CONTROL WILL BE AFFECTED WITHOUT FURTHER NOTICE. COUNCIL RESERVES THE RIGHT TO REFUSE OR CANCEL FURTHER CHEQUE PAYMENTS FROM CUSTOMER.

6. INTEREST

INTEREST WILL BE CHARGED ON ARREAR AMOUNT IF PAYMENT IS NOT RECEIPTED ON OR BEFORE ACCOUNT DUE DATE.

7. PAYMENT METHODS

7.1 OFFICIAL BANKER - NEDBANK

7.2 DIRECT PAYMENTS AT NEDBANK BRANCH - INDICATE ON DEPOSIT SLIP THE RELEVANT AUTHORITY TO CREDIT AND TEN-DIGIT MUNICIPAL ACCOUNT NUMBER -

Ekurhuleni Municipality Alberton
Ekurhuleni Municipality Benoni
Ekurhuleni Municipality Boksburg
Ekurhuleni Municipality Brakpan
Ekurhuleni Municipality Edenvale
Ekurhuleni Municipality Germiston
Ekurhuleni Municipality Kempton Park
Ekurhuleni Municipality Nigel
Ekurhuleni Municipality Springs

7.3 INTERNET BANKING, DEBIT ORDER, ATM AND TELEPHONE BANKING - EKURHULENI MUNICIPALITY IS A PREDEFINED BENEFICIARY ON ALL INTERNET BANKING PLATFORMS. IT IS MANDATORY TO INCLUDE TEN-DIGIT MUNICIPAL ACCOUNT NUMBER.

7.4 SIYAKHOKHA - VIEW STATEMENT AND MAKE PAYMENT ONLINE BY REGISTERING ON THE CITY OF EKURHULENI PORTAL WWW.SIYAKHOKHA.EKURHULENI.GOV.ZA

7.5 PAY AT THE FOLLOWING OUTLETS: ACKERMANS | BOXER | BUILDERS WAREHOUSE | BUILDERS EXPRESS | CHECKERS | MAKRO | PEP | PICK 'N PAY | SOUTH AFRICAN POST OFFICE | SHOPRITE | SPAR | TOP IT UP | USAVE

7.6 NOTE - ELECTRONIC PAYMENTS THROUGH FINANCIAL INSTITUTIONS OR ANY OTHER THIRD PARTY SYSTEM MUST BE PAID NOT LATER THAN 7 DAYS PRIOR TO ACCOUNT DUE DATE.PAYMENT THROUGH 3RD PARTY, WILL ONLY BE DEEMED TO HAVE BEEN RECEIVED WHEN RECEIPTED THROUGH COUNCILS FINANCIAL SYSTEM.

8. THIS STATEMENT MUST BE PRODUCED WHEN MAKING A PAYMENT

9. IF YOU DISAGREE WITH THE CONTENTS OF THIS ACCOUNT, PLEASE NOTIFY THE CHIEF FINANCIAL OFFICER IN WRITING, WITHIN A PERIOD OF 7 DAYS

10. NON-RECEIPT OF AN ACCOUNT DOES NOT EXEMPT ANY PERSON FROM THE LIABILITY TO PAY ACCOUNT ON DUE DATE.

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 14264

ADOPTION CONTRACT

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 homed 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 adhere 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.

UITPLASINGSKONTRAK

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 plesier en tevredenheid. Daar is ook verantwoordelikheid 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 besorg. As ek om enige rede nie daartoe in staat is om die dier te hou nie sal ek nie besit van die dier afstaaan nie tensy ek dit aan die DBV teruggee. Ingeval ek nie so optree nie, aanvaar ek aanspreeklikheid om alle onkostes 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 onkostes wat die DBV mag aangaan, insluitende die regsonkostes volgens 'n prokureur en kliënt skaal, in die terug verkryging van die dier.
(3) Ek sal die dier 'n redelike kans gee om aan sy nuwe tuiste gewoond 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 vasketting of gehok hou nie, en aanvaar dat indien die dier wel in my besit vasgeketting of gehok gevind word, die Vereniging dit dadelik sal verwyder.
(7) Ek kan die dienste van 'n privaat veeartsenykundige 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 inspuitings en ontwurmings ontvang en die is 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 verantwoordlik 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 rekbandjies mag vir katte gebruik word.
(12) My erf is behoorlik omheen 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 sewe (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 terugneem.
(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 snyvan ore en stert vir kosmetiese redes teen die Wet is.
(20) Ek stem hiermee toe dat as ek in gebreke is van enige van die bovermelde voorwaardes, sal die DBV dan geregtig wees om my eiendom te betree, en die dier in my sorg terug te neem waarna ek geen reg tot enige aksie of eis teen die DBV vir enige rede hoegenaamd het nie.

900141000187686

ADOPTER/CLAIMANT

NAME-Prof/Dr/Mr/Mrs/Ms (including initials): MR. D. DE WET.
RESIDENTIAL ADDRESS: 47 BUXTON STREET, DALVIEW, BRAKPAN.
RESIDENTIAL TELEPHONE No.:
POSTAL ADDRESS:
BUSINESS ADDRESS: 47 BUXTON STREET, DALVIEW, BRAKPAN.
BUS. TELEPHONE No.:
DONATION/CHARGE FOR ANIMAL: R1000-00
CASH/CHEQUE/CARD RECEIPT No.:
ID/PASSPORT/PENSION No.: 7012315015084
VEHICLE REG. No.: JC 62 MW GP
SIGNATURE:
WITNESS FOR SOCIETY:
DATE: 12-07-2022

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