



APPLICATION TO ADOPT AN ANIMAL

PLEASE NOTE: We retain the right to decline this application

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

NAME - Prof/Dr/Mr/Mrs/Ms (including initials): Mr Hennie Hayman

HOME ADDRESS: Caersters 16 Wellington

ID NO.: 82110245176081

POSTAL ADDRESS: 46

TEL NO (H): 082317813 (B): _____

CELL NO: 0766618146-Hennie FAX NO: 073 829 7812

E-MAIL: Hennie Hayman @ Outlook.com

Address where animal will be kept: Caersters Str. 16

Reason for wanting an animal: pet

Occupation: Sales rep

Do you own or rent your property: Own Do you have consent from owner / Body Corporate? No

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

Reason for wanting an animal: pet

Is the animal for yourself? yes YES/NO

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

What breed of dog or cat are you interested in? _____

Can you afford private veterinary fees? yes Who is your vet? TAA

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

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

Are all your animals sterilised? Give details yes

How many dogs and cats have you owned over the past 3 years? DOGS 2 CATS _____ OTHER _____

Which animals do you still have, and what happened to the others? past on

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

Full description of the fencing and gate: Vibe Height: 6 FT

What shelter is provided : OUTDOORS _____ KENNEL _____ OTHER House

Have you previously had pets from an SPCA? no Are there children under the 10 years in your household? 2

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 of application 30/03/26