ADOPTION CHECKLIST

ADMISSION NO: MBY 2972

CONTRACT NO: MBY 0110

- [x] Admission Form
- [x] Application for adoption
- [x] Pre-Home Inspection Report
- [x] Adoption contract
- [x] Copy of Identity Document or Driver's License
- [x] Proof of Residence
- [x] Letter from Body Corporate
- [x] Sterilization Contract and Date of sterilization Contract Done 18/06/2024 @ Mbay SPCA.
- [x] Copy of Vaccination Record/ Certificate
- [x] Microchip
- [x] Microchip Registration- chip number 992003000356204

Adoptee INFO:

Name & Surname Esté Griffiths

Contact INFO: 0836344785

Completed by: Kaye Kaye Lewis. Date: 20/06/2024

Manager: Date: 20/06/2024.

FUTURE POST HOME INSPECTION (every 6 Months)	
Date of Inspection	Date of Inspection

This checklist must be completed and attached to the front of every adoption that has been processes.

All documents relating to a single adoption must be kept together in a single bundle, in order of checklist.

ADMISSION NO

PRE AND POST HOME INSPECTION FORM DOMESTIC ANIMALS

PASSED: YES / NO DATE UNDERTAKEN: 13/06/24 TIME: 17:53

NAME OF APPLICANT: Esté Griffiths

ADDRESS: 8 Angelica road, Dana Bay

HOME TEL No: _____ CELL No: 0836344785

ANIMAL(S) ADOPTING: Cat

SEX: MALE AGE: [redacted] 8 weeks

PRE- HOME INSPECTION:

PROPERTY DESCRIPTION 1.7 acre			
Type and height of fence: Bricks / Nibiryok		Suitability of fence (i.e. small pets can't escape):	
Suitable shelter? (i.e. Kennel in protected area)	YES ☑ / NO ☐	Any sign of Chain/Runner?	YES ☐ / NO ☑
Is the front yard separated from the back?	YES ☐ / NO ☑	If yes, what partitioning?	
Any hazards? (pool, rubble, razor wire, etc)	YES ☐ / NO ☑	Specify:	
Does applicant live at the address?	YES ☑ / NO ☐	How many animals are on the property?	1

DESCRIPTION OF ANIMALS ON PROPERTY					
	1	**2**	**3**	**4**	**5**
BREED	Collie X				
CONDITION	good				
WELFARE (good?)	Good				
SEX & AGE	Male / 10yrs	/	/	/	/
STERILISED	YES ☒ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐

OTHER INFORMATION / COMMENTS lovely people animal is
good condition

PROPERTY APPROVED FOR THE FOLLOWING ANIMALS:

☑ **CATS** ☑ **SMALL DOGS**

☐ **MEDIUM DOGS** ☐ **LARGE DOGS**

INSPECTED BY: _____ **SPCA:** Mossel Bay **SIGNATURE:** _____

POST HOME INSPECTIONS

DATE	**RESULT**	**REMARK**	**BY WHOM**

DIAGRAM OF PROPERTY ON REVERSE OF THIS PAGE

BELANGRIKE KENNISGEWING

Hierdie rekening word ooreenkomstig die Raad se toepaslike beleid gelewer.

SPERDATUM:
Rekeninge is betaalbaar wanneer gelewer. Die sperdatum op die rekening is slegs van toepassing op die lopende rekening en nie op die agterstallige gedeelte van die rekening nie. Bedrae wat onvereffen is na die vervaldatum is agterstallig en die dienste kan opgeskort word sonder verdere kennisgewing.

METODES EN PLEKKE VAN BETALING:

1. POSORDERS moet gekruis en aan Mosselbaai Munisipaliteit betaalbaar gemaak word.
2. Betalings sal eerstens toegewys word na die oudste skulde(ongeag watter tipe diens), waarna dit in vooraf bepaalde prioriteitsvolgorde toegewys sal word.
3. **Betalings kan soos volg gemaak word:**

3.1 by enige van die MUNISIPALE KANTORE Maandae tot Vrydae (vakansiedae uitgesluit) 08:00 tot 15:30 (Mosselbaai kantoor) en 08:00 tot 15:00 (Groot Brakrivier, Hartenbos, D'Almeida en Kwa Nonqaba kantore).

3.2 by enige PICK n PAY, SHOPRITE, CHECKERS of SPAR winkel. Let wel dat minstens 48 uur toegelaat moet word vir die verwerking van alle derde party betalings.

3.3 deur direkte BANK- en/of ELEKTRONIESE BETALINGS by **STANDARD BANK** waar Mosselbaai Munisipaliteit as begunstigde gegee word. U rekeningnommer moet as verwysing gebruik word.

3.4 deur outomatiese BANKAFTREKKINGS. Vorms hiervoor is beskikbaar by enige van die Munisipale kantore.

RENTE:
Rente sal ingevolge die Raad se beleid op agterstallige bedrae gehef word.

OPSKORTING VAN DIENSTE:
Die toevoer van dienste mag, indien enige bedrag na die sperdatum verskuldig is, sonder verdere kennisgewing opgeskort word. Die deposito sal terselfdertyd hersien word en toeslag, soos van tyd tot tyd deur die Raad bepaal, sal bygevoeg word ongeag of die toevoer fisies gestaak is al dan nie.

REKENINGE:
Indien geen rekening ontvang is teen die 10de van 'n maand nie, moet 'n afskrif vanaf die Munisipaliteit aangevra word. Die rekening moet te alle tye getoon word wanneer 'n betaling gemaak word.

BEËINDIGING VAN DIENSTE:
Wanneer 'n perseel ontruim word moet die vertrekkende verbruiker die Munisipaliteit minstens 15 dae vooraf skriftelik kennis gee. Versuim hiervan sal tot gevolg hê dat die persoon aanspreeklik bly vir kostes gehef tot datum wat die kennisgewing ontvang en verwerk is.

VOORAFBETAALDE KRAG:
Waar 'n voorafbetaalde elektrisiteit meter in gebruik is en enige van die ander dienste op die perseel agterstallig is, sal slegs eenhede vir 'n gedeelte van die bedrag, wat aangebied word, uitgereik word terwyl die res van die bedrag teen die uitstaande rekening verdiskonteer sal word. (Die persentasie verdeling word van tyd tot tyd deur die Raad bepaal)

IMPORTANT NOTICE

This account has been rendered in terms of Council's relevant policies.

DUE DATE:
Accounts are payable when rendered. The due date on the account is on applicable on the current portion of the account and not the arrear portion. Amounts, which remain unpaid after the due date, are in arrears and service: may be suspended without any further notice.

METHODS AND PLACES OF PAYMENT:

1. POSTAL ORDERS must be crossed and be made payable to Mossel Ba Municipality.
2. Payments will always be appropriated to the oldest account (notwithstanding the kind of service), where after it will be appropriate in order of a predetermined priority.
3. **Payments can be made:**

3.1 at any of the MUNICIPAL OFFICES from Mondays to Fridays (public holidays excluded) 08:00 to 15:30 (Mossel Bay Office) and 08:00 to 15:00 (Great Brak River, Hartenbos, D'Almeida and Kwa Nonqaba offices).

3.2 at any PICK n PAY, SHOPRITE, CHECKERS and SPAR shop. Please note that at least 48 hours should be allowed for processing of al third party payments.

3.3 by direct BANK - and/or ELECTRONIC PAYMENTS to **STANDARD BANK** using Mossel Bay Municipality as beneficiary. Your Municipal account number must be used as the reference number.

3.4 by way of an automatic debit order. These forms are available at any of the Municipal Offices.

INTEREST:
Interest will be levied on arrear accounts in terms of Council's policy.

SUSPENSION OF SERVICES:
The supply of services may be disconnected without any notice, if any amou is due after the expiry date. The deposit will simultaneously be revised and surcharge, as determined by council from time to time, will be added wheth the supply had been physically disconnected or not.

ACCOUNTS:
If no account has been received by the 10th of a month, a copy should l obtained from the Municipality. The account must at all times be produc when payments or enquiries are made.

TERMINATION OF SERVICES:
When premises are vacated, the consumer leaving such premises must giv the Municipality 15 day's written notice prior to leaving. Failing to do so will result in this person being held liable for any levies until the date a written notice is received.

PRE-PAID ELECTRICITY:
Where a pre-paid electricity meter is in use and any of the other services c the property is in arrears, only units to the value of a portion of the amou tendered will be issued, the rest of the amount will be allocated to the arre account. (The percentage of the division will be as determined by Counc from time to time)

Mossel Bay MUNICIPALITY

MOSSEL BAY MUNICIPALITY
MOSSELBAAI MUNISIPALITEIT
UMASIPALA WASEMOSSELBAYI

ACCOUNT NUMBER:	86-007233-002-9
DATE OF ACCOUNT:	23/05/2024
LAST RECEIPT DATE:	22/05/2024
PREPAID METER NUMBER:	04247454707

Name:
GRIFFITHS M
Street Address:
8 A ANGELICASTRAAT DANABAAI
TAX INVOICE MONTHLY ACCOUNT

SERVICE DEPOSIT:	ERF NUMBER:	TOTAL VALUATION:	WARD No:
1354.90	7233000	2325000	11

DATE	DETAILS	READING DATE: 07/05/24	AMOUNT
		B/F BALANCE	2111.68
21/05/2024	0424745470	ELECTRICITY 18/04/2024-15/05/2024	434.40 *
		BASIC 377.74	
		VAT/BTW 56.66	
21/05/2024	JRK4177	WATER 09/04/2024-07/05/2024	402.07 *
		1847 - 1866 (19 Kl 28 Days)	
		BASIC 224.17	
		07/23 5.52 @ 0.000 = 0.00	
		. 12.89 @ 9.186 = 118.41	
		. 0.59 @ 11.942 = 7.05	
		VAT/BTW 52.44	
21/05/2024	400011	SEWERAGE	316.44 *
21/05/2024	300011	REFUSE	274.89 *
21/05/2024		RATES INSTALLMENT	666.41
		RECEIPTS	2111.00 -
		Balance Carried Forward	0.89 -
		VAT ON '*' ITEMS: 186.22 ACB TOT: 0.00	

CREDIT	60 DAYS	30 DAYS	CURRENT	Amount Due
0.00	0.00	0.00	2094.89	2094.00

PAYMENT MUST BE MADE ON OR BEFORE DUE DATE	DUE DATE	AMOUNT DUE
	18/06/2024	2094.00

VAT No. / BTW Nr. 4830118370

101 Marsh Street
Private Bag X 29
MOSSEL BAY
6500
(044) 606 5000
(044) 606 5062
admin@mosselbay.gov.za
www.mosselbay.gov.za

Payment Details / Betalings Besonderhede

Standard Bank **PREDEFINED BENEFICIARY.**
MOSSEL BAY MUNICIPALITY

Ref. No.: 860072330029

EasyPay >>>>>>915268600723300291

pay@ 11379 860072330029

Message / Boodskap

Standard Bank is now the Primary banker for the **MOSSEL BAY MUNICIPALITY.**
Municipal customers, service providers, members of the public and various stakeholders are therefore informed of the new banking partner for the MOSSEL BAY MUNICIPALITY.
The municipality has been added as a predefined beneficiary on the Bank Directory.

SOUTH AFRICA
Permit Mail
P4010395

Vou en skeur af.

Mossel Bay MUNICIPALITY

GRIFFITHS M
PO BOX 11052
DANA BAY
6510

860072330029

Fold and tear on perforation.

MBJ 2972
Dogpy

APPLICATION TO ADOPT AN ANIMAL

PLEASE NOTE: We retain the right to decline this application

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

NAME - Prof/Dr/Mr/Mrs/Ms (including initials): Mrs Este' Griffiths

HOME ADDRESS: 8 Angelica road, Dana bay

ID NO.: 7810170158088

POSTAL ADDRESS:

TEL NO (H): (B):

CELL NO: 0836344785 FAX NO:

EMAIL: este@workexploreabroad.co.za

Address where animal will be kept: 8 Angelica road, Dana bay

Occupation: Recruitment agent

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

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

Reason for wanting animal: Companion

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

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

Can you afford private fees? Yes Who is your vet? Heiderand Diere Kliniek

How many animals live on the property? DOGS? 1 CATS? 0 OTHERS

What are the sexes of your animals? DOGS: Male ✓ Female DOGS: Male Female

Are all your animals sterilised? Give details Yes

How many dogs and cats have you owned in the last 3 years? DOGS? 1 CATS? 1 OTHER?

Which animals do you still have, and what happened to the others? 1 Dog - cat jumped into neighbours yard and dogs

Is your property fenced and has a proper gate? Yes 1.8m Will you chain/ an animal? No bi hi

Full description of the fencing and gate: Wall & electric gate Height: 1,8 m

What shelter is provided: OUTDOORS Cubby house KENNEL OTHER Inside

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

Pre Home Inspection Fee: R100 Receipt No: 3485

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** 11/06/24.

ADMISSION, ASSESSMENT AND HISTORY RECORD LOADED

DBV SPCA
Garden Route

KENNEL No.	Dog C2			ADMISSION No.	MBY2972	
Stray	Surrender	Abandoned	Returned	Impounded	Confiscated	Request for euthanasia
Date in	06/06/24		Time in		Date for release	

IDENTIFICATION & LOST AND FOUND		Lost & Found checked	Yes / No	Lost & Found Date checked	06/06/24
Microchip/Collar or ID tag found	Yes / No	Date scanned or checked	06/06/24	Microchip or ID Tag number	

DESCRIPTION & HISTORY

Dog	Cat	Other species (Specify)		
Breed	DSH	Colour and Markings	White/Cream blue eyes.	
Condition	Fair	Sex	♂	Age
Temperament	Friendly	Sterilisation details	NO	Name
Coat Short	Tail Long	Teeth Condition Fair	Ears Pricked	Size M
Area found / collected from	Danabay. Brought in.			Date 06/06/24.
Reason for surrender	Too many cats			

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	Shannon Munn		
Residential Address	101 Plein Str, Dana Bay			
Postal Address	N/A			
Tel (H) N/A	Tel (W) N/A	Cell 067 000 7751		
Email	shannen1.munn@gmail.com			
Donation R	Cash	Card	EFT	(Receipt No.) N/A

PLEASE INSIST ON A RECEIPT

Confiscated: OB No: N/A Case No: N/A Inspector: N/A

STATEMENT OF SURRENDER

I do hereby certify that I **DO / DO NOT** own the animal/s described above, that **IT IS / IT IS NOT** a stray and I **DO / 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 uitdrukilk ooreengekom dat nog die DBV nog sy amptenare, en werknemers enige verpligtinge het, teenoor my ten opsigte van die hantering van die dier/e. Ek bevestig dat ek bo die ouderdom van agtien (18) jaar is. **Sien ook die "Voorwaardes" op die agterblad.**

Signature Refer to MBY2970	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 ☐ _____ On Date: _____

MY OWNER

NAME: Este Griffiths

POSTAL ADDRESS:

STREET ADDRESS: 8 Angelica Road

Dana Bay

HOME PHONE:

WORK PHONE:

CELLPHONE: 0836344785

BREEDER DETAILS:

ME

SPECIES: FELINE

BREED: DSH

COLOUR: CREAM

SEX: MALE

DATE OF BIRTH: 2024

MICROCHIP/TATTOO: 992003000356204

FEATURES/MARKS:

NEXT VACCINATION DUE

DATE	DATE	DATE
18/7/24		

I WAS VACCINATED ON

DATE	VACCINE AND BATCH NO.	VET SIGNATURE
7/6/24	35206 R1 Batch: Manf: Exp: Boehringer Ingelheim RABISIN R 924507 Lot/Batch: Ut. av./Exp.: E48017 28/01-2025	tWA
18/6/24		[illegible]

I WAS VACCINATED ON

DATE	VACCINE AND BATCH NO.	VET SIGNATURE

One of the very best things you can do to give me a long and healthy life is to vaccinate me against common diseases.
My mother gave me immunity during my first few weeks by disease-fighting antibodies in her milk.
Now it is up to you to keep my vaccinations up to date as advised by my vet.

Nobivac® DHPPi (Reg. No. G2377 Act36/1947), **Nobivac® KC** (Reg. No. G2604 Act 36/1947). **Nobivac® Canine-1 DAPPV** (Reg. No. G3892 Act 36/1947), **Nobivac® Feline-HCP** (Reg. No. G3880 Act36/1947), **Nobivac® Tricat Trio** (Reg. No. G3712 Act 36/1947), **Nobivac® Rabies** (Reg. No. G2207 Act 36/1947), **Quantel® Tablets** (Reg. No. G2717 (Act 36/1947) Contains Praziquantel (isoquinoline) 50 mg/tablet and Fenbendazole (benzimdazole) 500 mg/tablet. **Exitel Plus** (Reg. No. G4226 Act 36/1947) Contains Praziquantel 50 mg, Pyrantel 50 mg (equivalent to 144 mg pyrantel embonate) and Febantel 150 mg. **Exitel Plus XL** (Reg. No. G4227 Act 36/1947) Contains Praziquantel 175 mg, Pyrantel 175 mg (equivalent to 504 mg pyrantel embonate) and Febantel 525 mg. **Bravecto®** (Reg. No. G4083 Act 36/1947) each chew contains 25 mg Fluralaner per kg body weight.

MSD Animal Health

Find us on facebook.

Nobivac Quantel Exitel Plus Exitel Plus XL

facebook.com/BravectoSouthAfric

REPUBLIC OF SOUTH AFRICA
NATIONAL IDENTITY CARD

Surname:
GRIFFITHS
Names:
ESTHER HANNELIE
Sex:
F
Nationality:
RSA
Identity Number:
7810170168088
Date of Birth:
17 OCT 1978
Country of Birth:
RSA
Status:
CITIZEN

Signature:

Conditions:
This card has been issued by the Department of Home Affairs in terms of the Identification Act, Act 68 of 1997

If found please return to the Department of Home Affairs
For enquiry or verification purposes contact 0800 60 11 90

Date of Issue:
19 JUL 2019

59736

111117748

Backhome

Virbac

* COMPULSORY FIELDS
* PRINT INFORMATION

MICROCHIPPED ANIMAL REGISTRATION FORM

MICROCHIP NUMBER

992003000356204

Please note that it is the Pet Owner's responsibility to ensure that the Pet's details are registered on the BackHome Database

VET OR WELFARE ORGANISATION

Vet Practice Number *

Vet Practice Name *

Vet Practice Phone - Daytime *

PET OWNER INFORMATION

Cell No. * 0836344785 Only mobile numbers in South Africa, Botswana and Namibia will be receiving SMS notifications.

E-mail * este@workexploreabroad.co.za If possible, please provide a personal email, not a company email.

Title * MRS Initials * E Surname * GRIFFITHS

Street 8 Angelica City

Suburb Area Code DANA BAY

Country Province

Phone - Day time Phone - Night time

OTHER CONTACTS

Title * Initials * Surname *

Cell No. *

Title * Initials * Surname *

Cell No. *

Title * Initials * Surname *

Cell No. *

CHIP DETAILS

Registration Date * 02 - 10 - 2024

Date of Implant * 19 - 06 - 2024.

Was the Microchip implanted by this veterinary practice? Yes No

Name of Vet who implanted the Chip

PET DETAILS

Pet Name Date of birth 2024.

Species * FELINE Breed * DSH

Colour CREAM Markings

Gender (Male) Female Sterilised (Yes) No

KENNEL UNION OF SOUTH AFRICA (KUSA)

Are you a KUSA Registered Member? Yes No

KUSA Registration Number

Pet Registered Name

MEDICAL

Medical Conditions

Medical Insurance Company

Medical Insurance Policy Number

Medical Insurance Phone

PROTECTION OF PERSONAL INFORMATION LAW

The client hereby agrees that his / her personal information herein supplied and / or any of his / her personal information already in possession of the veterinarian may be processed by the said Veterinarian and / or it's office to bring about this agreement between the client and the veterinarian. The client further agrees that the veterinarian may forward his / her personal information to VIRBAC (Supplier of the Chip), in order for Virbac to lodge the clients personal information on their database for tracking purposes. The client also agrees that where other relevant institutions need to trace a lost animal, and they use that code on Virbac's website they will be given the personal information of the owner of said animal. The client also agrees that his / her personal information may be used by Virbac to forward him / her a Newsletter as well as to send him / her general information concerning pets. The client acknowledges that he / she has a right to object to the processing of its personal information for marketing purposes and unless expressly stated otherwise hereby consents to its personal information being used by _____ and Virbac RSA (Ltd) Pty for the above-mentioned purposes. SIGNATURE _____

REGISTRATION PROCESS - Please use one of the following option to register on the backhome database

1. On-line	Log onto www.backhome.co.za. Complete the registration process.
2. By fax	Fax this completed form to BackHome on 0800 222 546 (TOLL FREE) or 011 852 6364
3. By e-mail	Scan and E-mail the completed form to backhome@virbac.co.za or backhome.support.external@virbac.co.za