

ADOPTION CHECKLIST

- ☒ Admission Form
- ☒ Application for adoption
- ☒ Pre-home Inspection Report
- ☒ Adoption contract
- ☒ Copy of Identity Document or Driver's License
- ☒ Proof of Residence
- ☒ Letter from Body Corporate
- ☒ Sterilization Contract and Date of sterilization Contract Done 30/04/2025
- ☒ Copy of Vaccination Record/ Certificate
- ☒ Microchip
- ☒ Microchip Registration- chip number _____

ADMISSION NO:

MBY 5879

CONTRACT NO:

MA0018

Adoptee INFO:

Name & Surname Mrs J. Bodenstein

Contact INFO: 0784298677/
0828368846

07/05/25



992003000548404

Completed by: _____

Date: 02/05/2025

Manager: _____

Date: 02/05/25

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.



Dear Pet Owner,

Thank you for choosing BackHome and welcome to the BackHome family. Please keep your BackHome certificate in a safe place. It contains your details as registered on the BackHome national central database.

Please go to our website or download our app where you can conveniently look up or manage your details and that of your pets. For example you can update temporary addresses if you are going away, you can manage your contact details, and keep track of medical conditions of your pets.

You can login to the website and the app with the same details.

BackHome website (www.backhome.co.za) or download the BackHome App (from AppStore or PlayStore).

Alternatively you can contact us

E-mail: backhome@virbac.co.za

Phone: 011 027 8837 (weekdays 8:00 am - 5:00 pm)

Fax: 0800 222 546

Mail: Private Bag X115, Halfway House, 1685

Thank you for being a responsible pet owner in having your pet microchipped. Please keep your details updated – we hope your pet is always safe and never gets lost – but now you have an added security if that should ever happen.

Pet Information

Pet Details

Pet Name: MOLLY
Pet Registered Name:
Date of Birth: 01 Jan 1970
Species: Canine Breed: JACK
RUSSEL -
FOX
TERRIER
CROSS
Gender: Female Sterilised: Yes
Colour: BROWN AND WHITE
Markings:

KUSA

KUSA registered? No
KUSA Number:

Microchip Information

Microchip Number: 992003000548404
Dates: Registered: 07 May 2025
Implanted: 30 Apr 2025
Name of Welfare
Organisation that
implanted Chip : Garden Route SPCA Mosselbay
Person who implanted
chip: BHO SMITH

Medical

Medical Insurance Co:
Medical Insurance Number:
Medical Insurance Co Tel:
Medical Conditions:

Owner Information

Contact Details

Owner Name: JANET BODENSTEIN
Email: j.bodenstein@mweb.co.za
Work Phone:
Home Phone:
Mobile: +27 784298677

Address

Address: 12A EGRET STREET
Suburb: GROENVALLEI
Town/City: SEDGEFIELD
Province: Western Cape
Country: South Africa
Area Code: 6570

Other Contacts

ADMISSION, ASSESSMENT AND HISTORY RECORD

LOADED



Garden Route

KENNEL No. K-12 38				ADMISSION No. MBY5879		
Stray	Surrender	Abandoned	Returned	Impounded	Confiscated	Request for euthanasia
Date in	01/04/25		Time in	12:00		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	01/04/25	Microchip or ID Tag number	NONE

DESCRIPTION & HISTORY	Dog ☒	Cat ☒	Other species (Specify) 7 km		
	Breed	Jack Russell		Colour and Markings	Brown & white
	Condition	Good		Sex	♀
	Temperament	Good		Sterilisation details	NONE
	Coat short	Tail long	Teeth Condition fair	Ears DOWN	Size Small
	Area found / collected from Kwandoqaba				Date 01/04/25
	Reason for surrender OWNER CANT AFFORD				

ASSESSMENT		Surrendered by ☒ Name	
GOOD WITH:	Yes No	Found by	
Children		Residential Address	
Cats		Postal Address	
Other Dogs		Tel (H) NONE Tel (W) NONE Cell	
Livestock/Other		Email NONE	
DO THEY:	Yes No	Donation R NONE Cash Card EFT (Receipt No.) NONE	
Jump Fences		PLEASE INSIST ON A RECEIPT	
Run Away			

Confiscated: OB No: _____ Case No: _____ Inspector: **BND**

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 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 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 [Signature]	Witness for Society [Signature]
FOR OFFICE USE: PENDING ADOPTION	
Details of first Applicant	Details of second Applicant
Details of third Applicant	



PRE AND POST HOME INSPECTION FORM

PASSED: ☒ YES / ☐ NO

DATE UNDERTAKEN: 23 APRIL 2025

TIME: 16:00

NAME OF APPLICANT: MR & MRS BODENSTEIN

ADDRESS: 12A EGRET STREET, GROENVALLEI, SEDGEFIELD, 6570

HOME TEL No: CELL No: 0784298677 / 0828368846

ANIMAL(S) ADOPTING: "PEANUT" JACK RUSSEL CROSS

SEX: FEMALE

AGE: APPROX 3 MONTHS

PRE- HOME INSPECTION:

PROPERTY DESCRIPTION					
Type of fence:	PALISADE, WIRE MESH, WOOD		Height of fence:	1,5 – 1,8M	
Any sign of Kennel/Shelter?	☒ YES ☐ NO	Any sign of Chain/Runner?	☐ YES ☒ NO		
Is the front yard separated from the back?	☒ YES ☐ NO	If yes, what partitioning?	PALISADE, WOOD		
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?	NONE		

DESCRIPTION OF ANIMALS ON PROPERTY					
	1	2	3	4	5
BREED					
SEX	NO OTHER ANIMALS ON THE PROPERTY				
AGE					
STERILIZED	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO

OTHER INFORMATION / COMMENTS
THE PROPERTY IS FULLY SECURED, ALTHOUGH THERE ARE SOME AREAS THAT MAY NEED TO HAVE MESH PLACED OVER THE FENCING IF THE DOG IS ABLE TO ACCESS THEM (ONE IS ON TOP OF THE RETAINING WALL). I HAVE TOLD THEM TO ENSURE THAT THESE AREAS ARE COVERED SHOULD THE DOG VENTURE INTO THIS PART OF THE PROPERTY, ALTHOUGH IT IS NOT EASILY ACCESSIBLE.

PROPERTY APPROVED FOR THE FOLLOWING ANIMALS:

- ☒ SMALL DOGS
☒ MEDIUM DOGS
☐ LARGE DOGS

- ☒ CATS
☐ EQUINE
☐ OTHER (specify) _____

INSPECTED BY: BELINDA SPEED

SPCA: KNYSNA ANIMAL WELFARE SOCIETY

SIGNATURE:

POST HOME INSPECTIONS

DATE	RESULT	REMARK	BY WHOM

DIAGRAM OF PROPERTY ON REVERSE OF THIS PAGE

MICROCHIPPED ANIMAL REGISTRATION FORM

MICROCHIP NUMBER



992003000548404

VET OR WELFARE ORGANISATION

Vet Practice Number *

Vet Practice Name *

Vet Practice Phone - Daytime *

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

Only mobile numbers in South Africa, Botswana and Namibia will be receiving SMS notifications.

If possible, please provide a personal email, not a company email.

PET OWNER INFORMATION

Cell No. * 0784298677

E-mail * J. Badenstein@mweb.co.za

Title * MRS

Initials * J

Street 12 A Egret Str, Groenolei

Suburb

Country

Phone - Day time

Surname * BODENSTEIN

City

Area Code 360 GEFELD.

Province

Phone - Night time

OTHER CONTACTS

Title *

Initials *

Surname *

Cell No. *

Title *

Initials *

Surname *

Cell No. *

Title *

Initials *

Surname *

Cell No. *

CHIP DETAILS

Registration Date * 07 - 04 - 2025

Date of Implant * 30 - 04 - 2025

Was the Microchip implanted by this veterinary practice? ☒ Yes ☐ No

Name of Vet who implanted the Chip BHO SMITH

PET DETAILS

Pet Name MOLLY

Species * CANINE

Colour BROWN + WHITE

Gender Male ☒ Female

Date of birth 2025

Breed * JACK RUSSEL

Markings

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 its 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

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

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 Mrs J Bodenstein

HOME ADDRESS: 12 A Egret Street, Groenvlei,
Sedgefield 6572 ID NO.: 59083/0035083

POSTAL ADDRESS: As above

TEL NO (H): 0784298677 or (B): 0828368846

CELL NO: 11 FAX NO:

EMAIL: J. Bodenstein@mweb.co.za

Address where animal will be kept: 12 A Egret Street

Occupation: Retired Sedgefield 6572

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

Are you a student with consent to keep pets:

Reason for wanting animal: Companion YES/NO

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? Small female

Can you afford private fees? yes Who is your vet? Knysna vets

How many animals live on the property? DOGS? none CATS? OTHERS

What are the sexes of your animals? DOGS: Male N/A Female CATS: Male Female

Are all your animals sterilised? Give details N/A

How many dogs and cats have you owned in the last 3 years? DOGS? 2 CATS? OTHER?

Which animals do you still have, and what happened to the others? No dogs - previous one deceased (age 15)

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

Full description of the fencing and gate: lower level, electric gate Height: 1.8m
upper level, palisade + 8m

What shelter is provided: OUTDOORS KENNEL OTHER Indoor

Have you previously had pets from an SPCA? No Are there children under 10 in your household? 1

Pre Home Inspection Fee: R100 Receipt No: 6950

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 [Signature] Date of application 22/4/2

 **REPUBLIC OF SOUTH AFRICA**
NATIONAL IDENTITY CARD

Surname:
BODENSTEIN
Names:
JANET ALEXANDRA
Sex:
F
Nationality:
RSA
Identity Number:
5908310035083
Date of Birth:
31 AUG 1959
Country of Birth:
RSA
Status:
CITIZEN

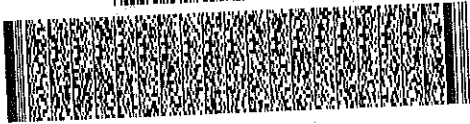

Signature:



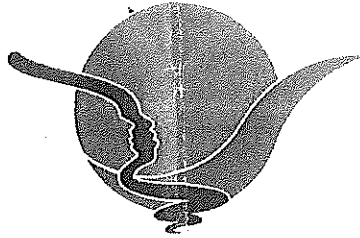

Conditions:
This card has been issued by the
Department of Home Affairs in terms of the
Identification Act, Act 68 of 1997
If found please return to the Department of Home Affairs
For enquiry or verification purposes contact 0800 60 11 90

Date of Issue:
19 APR 2017


104474288







KNYSNA
Municipality
Munisipaliteit
uMasipala

Collab Ref.:
File Fref: 17/4/R
Enquiries: Cllr Vanston

11 April 2024

To Whom It May Concern,

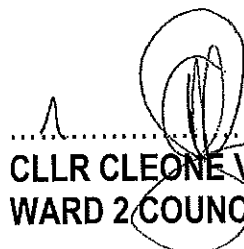
CONFIRMATION LETTER

This letter serves to confirm that **JANET ALEXANDRA BODENSTEIN**
ID :5908310035083 resides at the following address below

12 A EGRET STREET
SEDFIELD
6573

For more information do not hesitate to contact **Cllr VANSTON** at 044 302 6300 should you have any questions or wish to discuss this matter further.

Thanks and Kind Regards



.....
CLLR CLEONE VANSTON
WARD 2 COUNCILLOR

MY OWNER

NAME	Mrs J Bodenstein
POSTAL ADDRESS	
STREET ADDRESS	12 A Egret Street Greenside, Selkfield
HOME PHONE	
WORK PHONE	
CELLPHONE	0784298677
BREEDER DETAILS	

ME

SPECIES	CANINE
BREED	JACK RUSSEL
COLOR	BROWN + WHITE
SEX	FEMALE
DATE OF BIRTH	2025
MICROCHIP/TATTOO	992003000548404
FEATURES/MARKS	

NEXT VACCINATION DUE

DATE	DATE	DATE
------	------	------

I WAS VACCINATED ON

DATE	VACCINE AND BATCH NO.	VET SIGNATURE
02/04/25	 MSD Animal Health Batch: A240801 Exp: 01-2027 M:pro ALWA	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	

I WAS VACCINATED ON

DATE	VACCINE AND BATCH NO.	VET SIGNATURE
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	
	 MSD Animal Health	

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 Act 36/1947), Nobivac® KC (Reg. No. G2804 Act 36/1947), Nobivac® Canine-1 DAPPV (Reg. No. G3892 Act 36/1947), Nobivac® Feline-HCP (Reg. No. G3890 Act 36/1947), Nobivac® Tricat Trio (Reg. No. G3712 Act 36/1947), Nobivac® Rabies (Reg. No. G2207 Act 36/1947), Quantar® Tablets (Reg. No. G2717 Act 36/1947) Contains Praziquantel (isochlorine) 50 mg/tablet and Fenbendazole (benzimidazole) 500 mg/tablet, 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.