KUSA FORM 1

APPLICATION FOR A PERMIT TO PERFORM AN ESSENTIAL OR PERMITTED SERVICE

Regulations 16(2)(b) and 28(4)

Separate Application Forms must be submitted for each individual dog/puppy.

APPLICANT'S DETAILS: ***(all fields mandatory)*** ***PLEASE NOTE: APPLICANT MUST BE A KUSA MEMBER***

Surname			
Full Names			
Identity Number			
KUSA Membership No.	**Mobile Number**	**Kennel Name**	**Email Address**
Place of Residence			

TRAVEL FROM: ***(all fields mandatory)***

Surname			
Full Names			
Identity Number			
Contact Details	**Mobile Number**	**Alternate Number**	**Email Address**
Physical Address			

TRAVEL TO: ***(all fields mandatory)***

Surname			
Full Names			
Identity Number			
Contact Details	**Mobile Number**	**Alternate Number**	**Email Address**
Physical Address			

TYPE OF APPLICATION:

Fill in the applicable Section and provide details where required.

SECTION A: Transportation of Dogs

Permits will be granted for the transportation of puppies by Breeders to new Owners, or collected by new Owners from Breeders, as well as for bitches and stud dogs for breeding purposes such as matings, semen collection and artificial insemination.

Permits will only be issued for KUSA-registered dogs or, in the case of puppies, the progeny of KUSA-registered dogs*

(It is recommended that you carry proof of most recent vaccination with your permit, either in the form of an Invoice from your Veterinarian, or Vaccination Booklet.)

Reason for Application:	
Date of Transportation: A three-day window will be permitted after date provided.	

In the case of puppies, the Applicant must be the Breeder.

1. DOG'S DETAILS: INDIVIDUAL ADULT DOG ALREADY REGISTERED WITH KUSA: (*All fields are mandatory*)				
KUSA Registration No.	**Registered Name**	**Call Name**	**Microchip Number**	
Breed	**Colour**	**Date of Birth**	**Sex**	**Vaccinations are current:** **YES or NO.**

2. DOG'S DETAILS: IN THE CASE OF A PUPPY FROM A LITTER NOT YET REGISTERED WITH KUSA* (*All fields are mandatory*)				
Call Name	**Microchip Number**	**Breed**		
Colour	**Date of Birth**	**Sex**	**Vaccinations are current:** **YES or NO**	**Breeder/Seller Agreement:** **YES or NO**

Parents:	**KUSA Registration No.**	**Registered Name**	**Microchip Number**
SIRE			
DAM			

****In signing this form, the Breeder undertakes to register the puppy and its littermates with KUSA within one year of date of birth.***

SECTION B: Collection of essential products required for Kennel Management

Permits may be issued for collection of cleaning & disinfecting materials, purchase of essential supplies, etc.

It is recommended that you carry proof of the invoice or order placed with the supplier with your permit.

Reason for Application:			
Date of Journey: A three-day window will be permitted after date provided.			
Tick or complete the appropriate box:			
Breeder	**Owner**	**Sole Proprietor of Kennels**	**Other (specify)**

Description of products required/ordered:

SECTION C: Other (not specified under Section A or B)

Application for Permit to be considered by KUSA in accordance with Lockdown Regulations.

Reason for Application:

By my signature to this Application Form, I hereby declare that I accept and understand that if any information provided is found to be inaccurate to any degree whatsoever, I may be subject to disciplinary action in terms of Schedule 1 of the KUSA Constitution.

Full Names:

Signature:

Date:

Location:

Please email completed Application Form to karene@kusa.co.za
Please submit your Application well in advance.
Permits will be issued on a first-come-first-served basis.