


Insurance House

I.D. Card(s) Notice

Southern General Insurance Company
P.O. Box 28155
Atlanta, GA 30358-0155
Toll free 800.282.7024
Telephone 770.952.0080
Fax 770.952.3274
insurancehouse.com

Insured:

Alicia Dowdell
971 Brady Rd Lot 9
Americus, GA 31709

Agent:

108811
Southern Harvest Property and Casualty, Inc.
7711 Center Ave., Ste. 200
Huntington Beach, CA 92647
706-576-2344

Policy Number:

GAPA006701980

Date of Notice:

3/8/2024

NOTICE

The laws of the State of Georgia prohibit insurers from unfairly discriminating against any person based upon his or her status as a victim of family violence.

DETACH COMPLETED I.D. CARD(S) AND KEEP ONE IN EACH INSURED AUTOMOBILE.

GEORGIA LIABILITY INSURANCE IDENTIFICATION CARD Southern General Insurance Company MARIETTA, GEORGIA Policy #: GAPA006701980 Effective Date Expiration Date 3/8/2024 9/8/2024 Named Insured Alicia Dowdell Motor Vehicle Insured Year Make Model 2007 HOND ACCORD EX VIN#: 1HGCM56817A023269	GEORGIA LIABILITY INSURANCE IDENTIFICATION CARD KEEP THIS CARD IN YOUR MOTOR VEHICLE WHILE IN OPERATION IN CASE OF ACCIDENT Call our Toll-Free 24 hour Claims Hotline 1-800-446-9973
GEORGIA LIABILITY INSURANCE IDENTIFICATION CARD Southern General Insurance Company MARIETTA, GEORGIA Policy #: GAPA006701980 Effective Date Expiration Date 3/8/2024 9/8/2024 Named Insured Alicia Dowdell Motor Vehicle Insured Year Make Model 2011 FORD ESCAPE XLS VIN#: 1FMCU0C74BKA88077	GEORGIA LIABILITY INSURANCE IDENTIFICATION CARD KEEP THIS CARD IN YOUR MOTOR VEHICLE WHILE IN OPERATION IN CASE OF ACCIDENT Call our Toll-Free 24 hour Claims Hotline 1-800-446-9973



TERMS OF AGREEMENT AND TERMINATION

Subject to the terms and conditions set forth in this Agreement, Amera hereby engages the CNA/Caregiver to perform services for the Company as set forth herein, and the CNA/Caregiver hereby accepts such engagement.

TERMS

This Agreement shall become effective as of the date of its execution and shall continue until the CNA/Caregiver's satisfactory completion of the services performed hereunder as determined by Amera.

TERMINATION

1. Notwithstanding anything in this Agreement to the contrary;
2. The Term may be terminated by Amera at any time without advance notice, upon unperformed obligations by the CNA/Caregiver under this Agreement duly, and;
3. The Term may be terminated without cause by either Amera or CNA/Caregiver upon three (3) days written notice to the other.

Services to Be Performed

During the term of this Agreement, the CNA/Caregiver shall fulfill services required by Amera as follows:

1. Perform the best of service in achieving the result of work as required by Amera.
2. Ensure that during patient/client transport, he/she shall present and conduct himself/herself professionally in an appropriate and polite manner at all times.
3. Respond to all calls, texts and/or emails from Amera including but not limited to 24 hrs. and 90 mins confirmation
4. Shall be at/on time of the appointment schedule and devote time to periodically report trip statuses.
5. Fulfill her/his obligations under this Agreement and shall not in any circumstances cancel or abandon trips on the same day or in less than 24hrs.
6. CNA/Caregiver Driver should wear scrubs during transportation service.
7. Car is maintained clean and ensure quality transportation is being provided.

In the event of trip escalations leading to client complaints and subsequent charge reversals, we want to inform you that there may be a deduction in the payment for the respective trip. It is crucial to prioritize the satisfaction and safety of our clients to maintain the high standards we uphold.

By signing below, CNA/Caregiver acknowledges that he/she fully understands and agrees with the terms and conditions stated above.

Alicia Dowdell

Print Name:

Alicia Dowdell

Signature and Date: