

CLIENT SIGNING PACKET

Personal Assistant & Concierge Services

This packet documents the service purchased, what OMNIA is authorized to do, the client's responsibilities, confidentiality expectations, and any separate spending authority.

CLIENT NAME

SERVICE CYCLE

30 days

START DATE

END DATE

Packet contents: 1) Service Agreement 2) Confidentiality & Privacy Agreement 3) Client Authorization to Communicate & Act on Administrative Requests 4) Purchase & Spending Authorization 5) Client Intake & Request Form with request-specific contact authorization

Clear scope. Clear authorization. Clear records.

DOCUMENT 1

SERVICE AGREEMENT

30-day personal assistant and concierge service agreement

This Service Agreement is between OMNIA Concierge LC ("OMNIA") and the client identified below ("Client").

Client Information

CLIENT NAME	PHONE
EMAIL	PREFERRED CONTACT METHOD
MAILING ADDRESS	CITY / STATE / ZIP

Service Selection

- ☐ **OMNIA Everyday Help — \$650 / 30 Days**
- ☐ **OMNIA Access — \$275 / 30 Days (for approved qualifying clients)**
- ☐ **OMNIA Full-Service Concierge — \$_____ / 30 Days**

Full-Service package / scope:	_____
Full-Service request limit (if any):	_____

Full-Service note: The selected Full-Service price, scope, and request limits must be stated above or in a written Full-Service proposal/order form signed or accepted by both parties. If there is a direct conflict, the specifically identified Full-Service package terms control only for that package-specific issue.

Core Service Terms

- 1. 30-Day Service Cycle.** Each service cycle lasts 30 consecutive days. Payment activates the cycle and establishes the service start date unless OMNIA confirms a different start date in writing.
- 2. Request Limit.** Everyday Help and OMNIA Access include up to 10 requests during the 30-day service cycle. Full-Service Concierge follows the request limit, if any, stated in the selected Full-Service package.
- 3. Request Submission Window.** Days 1-20 are the period for submitting new requests. No new requests are accepted after Day 20 for that service cycle. Days 21-30 are reserved for OMNIA to complete, coordinate, and follow up on requests already submitted.
- 4. Unused Requests.** Unused requests expire at the end of the applicable 30-day service cycle and do not automatically carry over to a later cycle.
- 5. Request-Based Service.** OMNIA is request-based, not hourly. Clients are not charged according to the number of minutes or hours an ordinary request takes. Reasonable research, calls, messages, coordination, and follow-up necessary to accomplish the same objective remain part of the same request. A materially different objective is a new request.
- 6. Reasonable Scope.** A request must be reasonably capable of being handled as a concierge, administrative, research, coordination, or personal-assistance task. OMNIA may discuss a modified scope, additional service cycle, or Full-Service arrangement when a request is unusually extensive.

Service Boundaries and Client Responsibilities

- 7. Requests OMNIA May Decline or Stop.** OMNIA may refuse or discontinue a request involving illegal activity, unsafe conduct, harassment, fraud, misuse of services, material misrepresentation, a request outside OMNIA's

services, a request requiring a professional license OMNIA does not possess, or another material violation of this Agreement.

8. Professional-Service Limitation. OMNIA provides concierge, administrative, research, coordination, and personal-assistance services. OMNIA does not act as the Client's attorney, medical provider, financial adviser, real-estate professional, or other licensed professional unless OMNIA is separately legally qualified and expressly engaged in writing to perform that licensed service.

9. Client Cooperation. Client will provide accurate information, timely instructions, approvals, and direct participation when reasonably required. Client remains responsible for reviewing important information before making final decisions or entering agreements.

10. Accounts and Security. A third party may require the Client to authenticate, verify identity, or participate directly. Client should not place full payment-card numbers, passwords, or other unnecessary security credentials in the intake/request tracker. OMNIA may direct the Client to a more appropriate method when sensitive information is needed to complete an authorized request.

Third Parties, Purchases, and Outcomes

11. Third Parties. When authorized, OMNIA may contact businesses, organizations, landlords or property managers, service providers, and other appropriate third parties on the Client's behalf. OMNIA cannot guarantee another person's or company's response, decision, pricing, availability, processing time, appointment availability, approval, or outcome. A third party may require its own authorization or direct participation from the Client. The signed Client Authorization to Communicate & Act on Administrative Requests and the request-specific consent govern that contact; both must be current and applicable.

12. Purchases and Outside Expenses. Client purchases and third-party expenses are separate from OMNIA's service fee. These may include purchase prices, taxes, delivery charges, service fees, tips, application charges, deposits, or other third-party costs. OMNIA is not required to advance its own funds. A separate Purchase & Spending Authorization should be used whenever OMNIA is asked to place or coordinate a purchase using Client funds or authority.

Payment, Cancellation, and Termination

13. Payment. Full payment for the selected service cycle is required before services begin and before OMNIA accepts or begins Request #1. Payment activates the service cycle. Full-Service Concierge pricing is the amount shown in the selected package or accepted written proposal.

14. Cancellation and Refunds. If Client cancels before the service cycle begins and before OMNIA starts providing services, Client may request a refund of the service fee paid for that cycle, less any nonrefundable third-party charges specifically authorized by Client. Once the service cycle begins or OMNIA starts providing services, the service fee is nonrefundable, including for unused days or unused requests, except where applicable law requires otherwise.

15. OMNIA-Initiated Termination. OMNIA may terminate a service cycle for Client misconduct, nonpayment, misuse, unlawful or unsafe requests, material misrepresentation, repeated failure to cooperate, or a material violation of this Agreement. If OMNIA terminates because OMNIA is unable to provide the purchased service for reasons unrelated to Client conduct, OMNIA may provide an appropriate refund or credit for the portion of the purchased service not provided, subject to applicable law.

Liability and Disputes

16. Client Decisions. Client remains responsible for final decisions, purchases, appointments, applications, agreements, submissions, and transactions. OMNIA will use reasonable care in performing authorized services but does not promise a specific result unless expressly stated in writing.

17. Limitation of Liability. To the extent permitted by applicable law, OMNIA's total aggregate liability arising from a particular 30-day service cycle will not exceed the amount Client actually paid OMNIA for that service cycle. To the extent permitted by law, OMNIA will not be liable for indirect, incidental, special, exemplary, or consequential damages, or for losses caused by third parties, inaccurate information supplied by Client, or circumstances outside OMNIA's reasonable control. Nothing in this Agreement excludes or limits a right or liability that applicable law does not allow the parties to waive or limit.

18. Informal Dispute Resolution. Before filing a formal claim, the parties agree, whenever legally permitted, to first attempt to resolve the issue informally and in good faith. The complaining party will provide written notice

describing the issue and allow a reasonable opportunity for response and attempted resolution. If the issue is not resolved, each party retains the legal remedies available under applicable law.

19. Governing Law. This Agreement is governed by the laws of the State of Georgia, without overriding any mandatory consumer-protection, jurisdictional, or other non-waivable law that applies to the Client or transaction.

Electronic Records and General Terms

20. Electronic Communications and Signatures. Client agrees that this Agreement and related authorizations may be presented, accepted, signed, and stored electronically. An electronic signature or electronic acceptance is intended to have the same effect as a handwritten signature to the extent permitted by applicable law.

21. Entire Agreement and Changes. This Agreement, the selected service terms, and any written addendum or authorization incorporated into it make up the agreement for the service cycle. A change to a material term should be documented in writing and accepted by both parties.

22. Severability. If a provision is found unenforceable, the remaining provisions remain in effect to the extent permitted by law.

Client acknowledgment: By signing, Client confirms that the selected service, price, 30-day cycle, request rules, payment terms, service boundaries, and third-party limitations have been read and understood.

CLIENT SIGNATURE / ELECTRONIC SIGNATURE

Signature: _____ Date: _____

Printed Name: _____

OMNIA CONCIERGE LC AUTHORIZED REPRESENTATIVE

Signature: _____ Date: _____

Printed Name / Title: _____

DOCUMENT 2

CONFIDENTIALITY & PRIVACY AGREEMENT*How OMNIA handles information received while assisting a client*

OMNIA may receive private, personal, business, account, scheduling, household, or other confidential information while completing authorized requests. This agreement describes how that information may be used and shared.

1. Purpose-Limited Use. OMNIA will use Client information only as reasonably necessary to provide authorized services, communicate with Client, document the service relationship, process authorized transactions, meet legal obligations, protect the parties, and operate the service responsibly.

2. Limited Disclosure. OMNIA will limit disclosure of Client information to what is reasonably necessary to complete an authorized request or another permitted purpose under this agreement.

3. Reasonable Confidentiality Practices. OMNIA will take reasonable steps to protect Client information from unnecessary access, use, or disclosure. Client understands that no communication, storage, or technology system can be promised to be absolutely secure or confidential in every circumstance.

Permitted Disclosures

OMNIA may disclose information when reasonably necessary in any of the following circumstances:

- Client authorizes or instructs the disclosure.
- A business, organization, landlord/property manager, service provider, contractor, technology provider, or other third party needs limited information to carry out an authorized request.
- Disclosure is required by law, court order, subpoena, legal process, or a lawful government request.
- OMNIA reasonably believes disclosure is necessary to investigate or address fraud, misuse of services, impersonation, nonpayment, security concerns, or unlawful activity.
- OMNIA reasonably believes disclosure is necessary to respond to an imminent or serious safety concern, emergency, or threat of harm.
- Disclosure is reasonably necessary to obtain professional advice, insurance assistance, payment support, technical support, or other service-provider assistance, subject to appropriate limits.

4. Minimum Necessary Approach. When practical, OMNIA will share only the information reasonably needed for the specific task. Client may instruct OMNIA not to disclose particular information unless that restriction makes the request impossible or impractical to complete.

5. Client Control and Accuracy. Client is responsible for identifying information that should not be shared, for providing accurate information, and for notifying OMNIA if information changes or is no longer authorized for use. Client should avoid sending unnecessary passwords, complete payment-card numbers, or highly sensitive credentials through ordinary request notes.

6. Records and Retention. OMNIA may keep service records, communications, authorizations, receipts, and related information for a reasonable period for client service, business records, legal compliance, accounting, dispute handling, fraud prevention, and operational needs. OMNIA may delete or de-identify records when they are no longer reasonably needed, subject to legal and business-record requirements.

7. No Professional Privilege Created. This confidentiality agreement does not create attorney-client privilege, doctor-patient privilege, financial-adviser privilege, or another professional privilege that applies only to licensed or specially regulated relationships.

8. Legal Rights Preserved. Nothing in this agreement requires disclosure where law prohibits it or waives a Client right that applicable law does not allow the parties to waive.

Acknowledgment: Client understands that OMNIA takes confidentiality seriously, but limited disclosure may be necessary to perform authorized services or comply with legal, fraud-prevention, security, or safety obligations.

CLIENT SIGNATURE / ELECTRONIC SIGNATURE

Signature: _____ Date: _____

Printed Name: _____

OMNIA CONCIERGE LC AUTHORIZED REPRESENTATIVE

Signature: _____ Date: _____

Printed Name / Title: _____

DOCUMENT 3

CLIENT AUTHORIZATION TO COMMUNICATE & ACT ON ADMINISTRATIVE REQUESTS

OMNIA Concierge LC and its designated representatives may assist only within the scope below and the instructions approved for each request. Complete the dates and scope before signing.

Client legal name _____	Client record or service cycle ID _____
Effective date and time with time zone _____	Expiration date and time with time zone _____
Service cycle start date _____	Service cycle end date _____

Authorized scope

Select one: ☐ Approved administrative requests during the identified service cycle. ☐ Only these request numbers or matters: _____

Third parties permitted or excluded and any other restrictions

I authorize OMNIA Concierge LC and its designated representatives assigned to my requests to communicate with the relevant third parties and carry out the following routine administrative actions only when I approve the specific request:

- Schedule, reschedule, and cancel appointments; schedule meetings, conferences, and service visits.
- Call businesses and customer-service departments; check order, delivery, service, and application statuses.
- Request general information, quotes, availability, and documentation the third party may lawfully provide.
- Follow up on previously submitted requests; coordinate services and reservations.
- Communicate information I specifically authorize OMNIA to provide and receive routine responses needed for that request.
- Perform other routine administrative communications necessary to complete an approved OMNIA request, within these limits.

This form alone does not authorize contact about every account or matter. Each request must identify the relevant third party, approved task, information OMNIA may share, and my express permission to contact that party. Blank fields and silence do not grant permission.

Authority limits and third party requirements

Truthful identification

OMNIA representatives must identify themselves by their own name and OMNIA affiliation. Example: “Hello, my name is Rasheeda Ware with OMNIA Concierge. I’m calling on behalf of [Client Name], who has authorized us to assist with this matter.”

Actions this form does not authorize

- Impersonating me, claiming to be me, signing my name, or making a legally required declaration, certification, sworn statement, or attestation for me.
- Accessing an account without proper authorization, bypassing identity verification or provider security, or using an account reference number as proof of account-access permission.
- Making payments, purchases, transfers, deposits, withdrawals, trades, credit applications, or other financial transactions or commitments. A separate lawful authorization and OMNIA policy must specifically permit any such action.
- Signing contracts, waiving rights, consenting to treatment, changing legal or official records, or acting as my attorney, medical decision-maker, or other licensed professional.

Appointment changes and reservations must remain within my specific instructions. If an action would incur a fee, accept binding terms, or create a financial commitment, OMNIA must pause for the required separate authorization or ask me to complete that step directly.

When a provider requires its own form

Third parties are not required by this form to accept OMNIA’s authorization. Healthcare providers, financial institutions, government agencies, schools, insurers, and other organizations may require their own authorization, consent, identity-verification, HIPAA, power-of-attorney, or representative forms. This form is not a HIPAA release or a power of attorney and does not replace those requirements.

OMNIA will obtain or help prepare the required provider form using my instructions and route any required signature, attestation, consent, or identity verification back to me. OMNIA will pause the affected action until the provider’s requirements are satisfied. A provider form does not automatically expand OMNIA’s service scope or override its policies.

Duration revocation and signature

Effective period

This authorization begins at the later of my signature or the stated effective date and time. It ends at the earliest of the stated expiration, the end or termination of the identified service cycle, completion of all specifically listed matters if scope is limited to those matters, or my revocation. Dates must be completed before acceptance. It does not renew automatically; a new service cycle requires a new authorization.

Revocation and changes

I may revoke all or part of this authorization, including permission for one request or third party, at any time by written notice through my OMNIA client account or the OMNIA contact channel used for my service. OMNIA will treat the revocation as effective on receipt, stop new affected actions, cancel pending affected actions where possible, record the change, and confirm receipt. An oral request to stop will pause affected work while written confirmation is obtained.

Revocation does not undo completed actions or disclosures made before receipt. OMNIA will identify pending actions it could not stop and notify affected third parties of withdrawal where appropriate. A provider may require its own revocation process; OMNIA will help route that process to me. OMNIA may retain the authorization and audit record under its recordkeeping policy. Revoking permission may prevent completion of affected requests but does not itself cancel the service agreement.

Electronic signature and client copy

For electronic onboarding, I will be shown this completed form and the electronic-record disclosure before signing. My deliberate electronic signature confirms my intent to authorize only the scope above. OMNIA will retain the signed version and signing record in my client record and provide a copy. My assigned representative may retrieve it for an approved request and share it only when necessary and authorized. A typed name entered by OMNIA is not my signature.

☐ I have reviewed the completed dates, scope, limits, and revocation instructions and authorize OMNIA as stated in this form.

Client signature or electronic signature _____	Signature date and time with time zone _____
Client printed name _____	Authorization ID and form version _____

If signing through a legally authorized representative, identify that person, their capacity, and supporting authority separately. OMNIA must verify that authority before accepting the signature.

OMNIA acknowledgment of receipt: _____ Date: _____

DOCUMENT 4

PURCHASE & SPENDING AUTHORIZATION

Use this form whenever OMNIA is asked to place or coordinate a purchase for a client

CLIENT NAME

RELATED REQUEST #

PURCHASE / ITEM / SERVICE

MERCHANT / PROVIDER

Spending Authorization

Expected purchase price	\$ _____
Estimated taxes	\$ _____
Delivery / service fees	\$ _____
Tip, if authorized	\$ _____
Other authorized third-party charges	\$ _____
APPROVED MAXIMUM TOTAL	\$ _____
Substitution / variation instructions	_____

Client Approval

☐ I authorize OMNIA to place or coordinate the purchase described above, up to the Approved Maximum Total.

☐ I understand that OMNIA must obtain new approval before exceeding the Approved Maximum Total or making a materially different substitution, unless my written instructions above clearly authorize the change.

- Client is responsible for the purchase price, taxes, delivery charges, service fees, tips when applicable, and other authorized third-party costs.
- OMNIA's service fee is separate from these client expenses.
- OMNIA is not required to advance its own funds or extend credit for Client expenses.
- Returns, cancellations, warranties, credits, and refunds remain subject to the merchant/provider's policies and processing times.
- OMNIA will provide or retain available receipts, confirmations, or purchase documentation reasonably related to the authorized transaction.
- This authorization is limited to the purchase described here. It does not create ongoing or recurring spending authority.

Payment security: Do not write a full payment-card number or account password on this form. OMNIA and Client should use an appropriate payment or authentication method for the specific purchase.

CLIENT SIGNATURE / ELECTRONIC SIGNATURE

Signature: _____ Date: _____

Printed Name: _____

OMNIA CONCIERGE LC AUTHORIZED REPRESENTATIVE

Signature: _____ Date: _____

Printed Name / Title: _____

DOCUMENT 5

CLIENT INTAKE & REQUEST FORM

Simple service-cycle tracker for client information and Requests #1–10

Client & Service Information

CLIENT NAME	PHONE
EMAIL	PREFERRED CONTACT METHOD
SERVICE SELECTED	AMOUNT PAID \$
SERVICE START DATE	SERVICE END DATE
DAY 20 REQUEST DEADLINE	OMNIA REPRESENTATIVE

How to use this tracker: Enter each new request on or before the Day 20 request deadline. Attach a completed Submit a Request authorization page for each request involving third-party contact. Status options: Submitted / In Progress / Waiting / Completed. A request is not permission to contact a third party unless the client explicitly authorizes that contact.

Request Tracker

REQUEST #1	DATE SUBMITTED	STATUS	DATE COMPLETED
		☐ Submitted ☐ In Progress ☐ Waiting ☐ Completed	
BRIEF REQUEST DESCRIPTION			
NOTES / FOLLOW-UP			

REQUEST #2	DATE SUBMITTED	STATUS	DATE COMPLETED
		☐ Submitted ☐ In Progress ☐ Waiting ☐ Completed	
BRIEF REQUEST DESCRIPTION			
NOTES / FOLLOW-UP			

REQUEST #3	DATE SUBMITTED	STATUS	DATE COMPLETED
		☐ Submitted ☐ In Progress ☐ Waiting ☐ Completed	
BRIEF REQUEST DESCRIPTION			
NOTES / FOLLOW-UP			

REQUEST #4	DATE SUBMITTED	STATUS	DATE COMPLETED
		☐ Submitted ☐ In Progress ☐ Waiting ☐ Completed	
BRIEF REQUEST DESCRIPTION			
NOTES / FOLLOW-UP			

REQUEST #5	DATE SUBMITTED	STATUS	DATE COMPLETED
		☐ Submitted ☐ In Progress ☐ Waiting ☐ Completed	
BRIEF REQUEST DESCRIPTION			
NOTES / FOLLOW-UP			

REQUEST #6	DATE SUBMITTED	STATUS	DATE COMPLETED
		☐ Submitted ☐ In Progress ☐ Waiting ☐ Completed	
BRIEF REQUEST DESCRIPTION			
NOTES / FOLLOW-UP			

REQUEST #7	DATE SUBMITTED	STATUS	DATE COMPLETED
		☐ Submitted ☐ In Progress ☐ Waiting ☐ Completed	
BRIEF REQUEST DESCRIPTION			
NOTES / FOLLOW-UP			

REQUEST #8	DATE SUBMITTED	STATUS	DATE COMPLETED
		☐ Submitted ☐ In Progress ☐ Waiting ☐ Completed	
BRIEF REQUEST DESCRIPTION			
NOTES / FOLLOW-UP			

REQUEST #9	DATE SUBMITTED	STATUS	DATE COMPLETED
		☐ Submitted ☐ In Progress ☐ Waiting ☐ Completed	
BRIEF REQUEST DESCRIPTION			
NOTES / FOLLOW-UP			

REQUEST #10	DATE SUBMITTED	STATUS	DATE COMPLETED
		☐ Submitted ☐ In Progress ☐ Waiting ☐ Completed	
BRIEF REQUEST DESCRIPTION			
NOTES / FOLLOW-UP			

Submit a Request

Complete one copy for each request. Attach additional pages if more than one third party is involved. Reference numbers identify the matter; they do not authorize account access or financial actions.

Client name and client record ID _____	Request number and date _____
Business or organization and department _____	Contact person phone email or website _____
Account holder or order name _____	Account order or reference number _____

Use only the identifier needed for this matter. Do not enter passwords, PINs, one-time codes, Social Security numbers, full bank-account numbers, or payment-card details. Use a nonfinancial customer/account reference or masked identifier; provide a fuller identifier only through an approved secure channel if required.

Requested task and desired outcome

Requested appointment or service dates and time zone

Information OMNIA may provide and documents it may request or receive

Limits and information OMNIA must not disclose

Contact permission for this request

☐ I explicitly authorize OMNIA Concierge LC and its assigned representatives to contact the third party identified above for this request, perform only the administrative actions described, and share or receive only the information specified, subject to my current signed authorization and any provider requirements. This does not authorize impersonation, my signature or attestations, unauthorized account access, or financial transactions.

☐ I do not authorize third-party contact. Provide research or preparation only and route contact to me. Select one option; no selection means no contact permission.

Linked authorization ID _____	Earlier request permission expiry if any _____
Client signature or deliberate electronic acceptance _____	Date and time with time zone _____

Permission ends when this request is completed, revoked, or expires, or when the underlying authorization ends, whichever occurs first. A material change in party, task, information, or authority requires fresh consent. Known provider authorization required: _____

Cycle Closeout

REQUESTS COMPLETED
____ / 10

REQUESTS UNUSED / EXPIRED
____ / 10

CLOSEOUT DATE

NEXT CYCLE (IF ANY)

Client acknowledges that this tracker is an operational record of requests and status. It does not expand OMNIA's authority beyond the signed agreements and authorizations in this packet.

Optional Packet Receipt Acknowledgment

Client confirms receipt of the completed or applicable portions of this packet for the service cycle identified above.

CLIENT SIGNATURE / ELECTRONIC SIGNATURE

Signature: _____ Date: _____

Printed Name: _____

OMNIA CONCIERGE LC AUTHORIZED REPRESENTATIVE

Signature: _____ Date: _____

Printed Name / Title: _____