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### Home Care Contract

This Home Care Contract is entered between \_\_\_\_\_(Client),\_\_\_\_\_,  
\_\_\_\_\_, Caring Ladies Home Care Referral Group LLC, Independent Referral Agent for the  
Elderly (Also known as Caring Ladies)\_\_\_\_\_. The Client and Caring Ladies shall  
collectively known here as the parties.

Whereas, the purpose of this contract is to set out the terms of service to be provided to \_\_\_\_\_ by  
Caring Ladies

In consideration of the mutual promises and other valuable consideration exchanged, the Parties hereby  
agree and contract as follows:

1. AUTHORIZATION. The Client hereby grants the authority to Caring Ladies to provide Home  
Healthcare Services to \_\_\_\_\_ at home located  
at \_\_\_\_\_,
2. LICENSING. Caring Ladies warrants that, We are registered in the state of New Jersey to  
provide Home Care. Further, any employee or representative of Caring

Ladies performing services under this contract is Licensed in the state of New Jersey as a CHHA/CNA  
and is current on all training and certifications

3. DESCRIPTION OF SERVICES. Caring Ladies shall provide an Aide to attend to client, the Aide  
shall have the ability to:
  - Bathing, grooming, hygiene and toileting
  - Meal preparation, companionship and monitoring
  - Medication reminders and light housekeeping.

Caring Ladies or its representatives will assist the \_\_\_\_\_ to live at home to have as much  
control over the home environment and life as possible.

Apart from performing above tasks Caring Ladies shall do similar related task to be mutually agreed upon  
by both parties.

4. . The Client's information:

Name \_\_\_\_\_ DOB \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Phone # \_\_\_\_\_

Relationship \_\_\_\_\_

In an emergency situation, Caring Ladies shall immediately contact the following person:

Name \_\_\_\_\_ Address \_\_\_\_\_

Phone #: \_\_\_\_\_

4. PAYMENT. There is an initial one time registration, insurance fee equal to the amount of the aid's one week pay this fee applied only if such aide is offered a permanent position.
5. (NOT ON SUBSTITUTED OR TEMPORARY SERVICE CASES).

On a permanent position the Client shall pay a Weekly fee to Caring Ladies in the amount of

\_\_\_\_\_

The Weekly fee constitutes payment for all services performed up to and includes \_\_\_\_ hours/days per week or live/in position.

Food expense per DAY CASH of \$10 - \$15 a day is paid directly to such aid. Please do not hesitate to call if further explanation is needed.

All services performed on a public holiday, shall be billed at one and one half the rate of pay to Caring Ladies.

All payments shall be made only to Caring Ladies Home Care Group, Vivian Van Dyck

(Case Coordinator). At no time under any circumstances should any payment be made DIRECTLY to the Home Care Associate.

## 6. DETAILS OF INSURANCE COVERAGE

The details of the plan which covers the home care in whole or in part are as described below:

7. CONFIDENTIALITY. Caring Ladies understands that any and all private information obtained about the Client, Client's family \_\_\_\_\_ or relatives during the course of employment, including but not limited to medical, financial, legal, career and assets are strictly confidential and may not be disclosed to any third party for any reason, The obligations of Caring ladies under this clause survives termination of this contract.

8. AMENDMENT. This Contract may be modified or amended in writing, if the writing is signed by the party obligated by

9. ATTORNEY'S FEES. In the event of any breach of the contract, the party responsible for the breach agrees to pay reasonable attorney's fees and costs incurred by the other party in the enforcement of the Contract or suit for recovery of damages. The prevailing party in any suit instituted arising out of this Contract will be entitled to receive reasonable attorney's fees and costs incurred in such suit.

10. APPLICABLE LAW. This contract shall be governed by the laws of the State of New Jersey

11. SIGNATURES. This Contract shall be signed by \_\_\_\_\_ and by \_\_\_\_\_ of Caring Ladies

Dated: \_\_\_\_\_

Clients:

\_\_\_\_\_  
\_\_\_\_\_

Caring Ladies Home Care Referral Group:

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\_\_\_\_\_  
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