Southeastrans, Inc.
4751 Best Road, Suite 210
College Park, GA 30337
Telepone Number: (404) 209-4000
Administrative Fax: (678) 510-1351

For Southeastrans Use Only:

Provider No: _____

Certification Date: _____

Southeastrans Provider Personnel Listing

Company Information											
Company Name:					Date:		Tax ID Number:				
Business Location/Street Address:			City:		County:		State:	GA	Zip Code:		
Mailing Address(If different from above):			City:		County:		State:	GA	Zip Code:		
Business Telephone Number:		Business Fax Number:			E-Mail Address:						

Personnel Listing			
Driver's Full Name (as it appears on their Georgia Driver's License)	Date of Birth	Social Security Number	Driver's License Number

It is very important that this personnel information be current and up-to-date at all times. If you make any additions to this list by adding new drivers, you are required to complete a new form and fax it to us BEFORE the new employee begins transporting Medicaid Members. If you need to delete a person from this list because they no longer work for you, you can cross their name off of this list and re-fax it to us.

If you have more than 20 drivers in your company, please make copies of this sheet and attach them together.