



WELCOME KIT



Occupational Accident Claim Reporting Instructions for Avantage Association #005331

Welcome!

Gallagher Bassett is your Occupational Accident claims administrator for your Hudson/Avant Underwriters insurance program. Gallagher Bassett's commitment is to assure you that comprehensive claim services are accessible in the event that you have a claim. When claims occur, the faster Gallagher Bassett receives notice of a loss, the sooner we can:

- Provide you, the insured, with direction.
- Resolve the claim.

The prompt notification of the claim through Gallagher Bassett's dedicated toll-free reporting line addresses the immediate needs of the insured. Our services will:

- Complete the First Notice of Loss.
- Provide you a confirmation copy of the notice of loss.
- Immediately electronically forward the loss to our claims handling professionals.
- Manage the expenses of the accident.

Enclosed is the following information:

- | | | |
|---|--------------------------------------------------------------------------------------------------------------------------|--------|
| 1 | Toll-free Claims Reporting Quick Reference Sheet: a general list of questions that will be asked when reporting a claim. | Page 3 |
| 2 | Email Reporting Reference Sheet followed by cover sheet. | Page 4 |
| 3 | Claims Reporting Branch Matrix: who and where to call with questions or comments on your claim. | Page 6 |

Toll-free Claims Reporting Quick Reference Sheet for Claims 1 (844) 716-2793

To report your claims quickly and efficiently, please have the following information ready when you call your toll-free claims reporting service. This is a general listing for your quick reference. Additional information may be requested based on state requirements. Thank you for your prompt claims reporting!



CLIENT NUMBER ID: #005331

PARTICIPATING COMPANY

- Company Name, DBA (Doing Business As name)
- Policy Number

INJURED PERSON INFORMATION

- Name
- Address
- Contact and phone

CLAIM INFORMATION

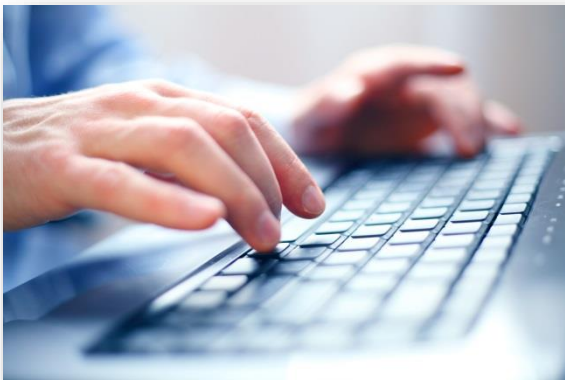
- Exact location where the accident occurred (address, street names, intersection)
- Exact date and time of accident
- Nature of claim
- Specific description of situation
- Description of property
- Nature of damaged goods or property
- Bill of lading information
- Make and model of vehicle for auto claims
- License number, VIN
- Vehicle owner and contact details
- Other vehicle details
- Name and contact details of witnesses
- Was anyone injured?
- Name and address of medical provider

Email Reporting Claims Quick Reference Sheet

tnwclaims@tnwinc.com

To email your claims quickly and efficiently, please have the following information ready to send to tnwclaims@tnwinc.com

This is a general listing for your quick reference. Additional information may be requested. Thank you for your prompt claims reporting!



CLIENT NUMBER ID: #005331

PARTICIPATING COMPANY

- Company Name, DBA (Doing Business As name)
- Policy Number

INJURED PERSON INFORMATION

- Name
- Address
- Contact and phone

CLAIM INFORMATION

- Exact location where the accident occurred (address, street names, intersection)
- Exact date and time of accident
- Nature of claim
- Specific description of situation
- Description of property
- Nature of damaged goods or property
- Bill of lading information
- Make and model of vehicle for auto claims
- License number, VIN
- Vehicle owner and contact details
- Other vehicle details
- Name and contact details of witnesses
- Was anyone injured?
- Name and address of medical provider

Avantage Association

Client# 005331
Email Cover Sheet

Date:

Fax:

Email:

To:

Re:

Pages: (including cover)

REQUIRED INFORMATION:

(Gallagher Bassett must have the following information in order to assist in the timely completion of the first notice of loss. Thank you.)

VDN: 2228380
GB Client Number: 005331
GB Client Name: Avantage Association
Participating Company Name and Policy Number:
Date of Loss:
Location/Site Code:

INJURED PERSON'S INFORMATION:

Name:
Phone Number:
Email Address (Please provide an email address if a copy of the first notice should be sent as a confirmation.)

GALLAGHER BASSETT BRANCH MATRIX – CLIENT #005331

HANDLING BRANCHES		
Claims	<p>Gallagher Bassett Services – 171P. O. Box 419797 Kansas City, MO 64141 Phone: 816-216-5217 Fax: 866-486-5243 Toll Free: 800-821-5401 Brenda Cullinan, Branch Manager E-Mail: brenda_cullinan@gbtpa.com</p> <p>(UPS, Federal Express, etc) 2600 Grand Boulevard Kansas City, MO 64141</p>	<p>Senior Resolution Manager: Jay Anderson Direct Dial: 816-216-5202 E-mail: jay_anderson@gbtpa.com</p> <p>Resolution Manager: Ashley Laughlin Direct Dial: 816-216-5209 E-mail: ashley_laughlin@gbtpa.com</p> <p>Supervisor: Kimberly Fitch Direct Dial: 816-216-5199 E-mail: kimberly_fitch@gbtpa.com</p>

We **GUIDE** those suffering a loss to the best outcomes for their health and financial wellbeing.

We **GUARD** our clients' assets as the trusted stewards of their claims and risk management programs.

We **GO BEYOND** expectations in the continuous pursuit of a better way.



2850 Golf Road, Rolling Meadows, IL 60008 | (630)773-3800 | gallagherbassett.com

Gallagher Bassett is the premier provider of global claims services, dedicated to exceptional customer service and demonstrably superior outcomes. GB helps people, teams and businesses overcome adversity and loss through the guiding expertise of over 5,000 claims professionals, all committed to going beyond expectations in the continuous pursuit of a better way.

The analysis and views in this Product/Service Overview are the property of Gallagher Bassett. Copyright © 2016. Gallagher Bassett Services, Inc. All rights reserved.