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# CONTACTS

TOWNSHIP OFFICIALS OF ILLINOIS RISK MANAGEMENT ASSOCIATION

## CLAIM REPORTING HOTLINE (844) 562-2720 | Available 24/7 | toirma.org/claims-management

### Executive Office

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## Human Resources Help Line

**(888) 472-6785** (All calls promptly returned within 24 hours.)

All TOIRMA members have access to Human Resources professionals to assist in answering employment-related questions and issues.

**The Human Resources Help Line covers many areas such as:** Discipline & Documentation • Legal Termination • Discrimination

Another service brought to you by TOIRMA.



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# CLAIM REPORTING HOTLINE

**(844) 562-2720** | Available 24/7 | [toirma.org/claims-management](http://toirma.org/claims-management)

To report a claim, please call (844) 562-2720 with the following information:

## \* TOWNSHIP - TOWING/GLASS CLAIM

- ✓ Township Name & County
- ✓ Mailing Address
- ✓ Phone#
- ✓ Date of Loss
- ✓ Year, Make & Model of Vehicle/Equipment

- ✓ Employee's Direct Supervisor
- ✓ Employee's Job Description
- ✓ Description of Injury
- ✓ Body Part Involved
- ✓ Witness Information
- ✓ Treatment Facility Information
- ✓ Wage Statement if Lost Time

## \* TOWNSHIP - AUTO/INLAND MARINE/PROPERTY

- ✓ Township Name & County
- ✓ Mailing Address
- ✓ Phone#
- ✓ Date of Loss
- ✓ Year, Make & Model of Vehicle/Equipment
- ✓ Address of Property Damaged
- ✓ Description of How Damage Occurred
- ✓ Description of Damage
- ✓ Township Driver Name & Phone#

## Claim Staff

**Bailey Ellison**, ext. 1418  
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[kmusgrave@ccmsi.com](mailto:kmusgrave@ccmsi.com)

## \* LIABILITY CLAIM

- ✓ Township Name & County
- ✓ Mailing Address
- ✓ Phone#
- ✓ Date of Loss
- ✓ Time
- ✓ Location
- ✓ Description of Incident
- ✓ Name, Address, Phone# of party claiming damage or injury
- ✓ Witness Name & Phone#
- ✓ Authorities & Report#

## \* WORKERS' COMPENSATION CLAIM

- ✓ Township Name & County
- ✓ Mailing Address
- ✓ Phone#
- ✓ Date of Loss
- ✓ Time
- ✓ Location
- ✓ Employee Name, Address, Phone#
- ✓ Employee DOB, SSN & Date of Hire