

	Injured Employee	Department	WC TPA	Insurance & Benefits	HR-Payroll
First Report of Injury-DWC-1	NA	Copy	NA	NA	Send Original
Supervisor's Report of Accident	NA	Copy	Email/ Fax**	Copy or Email	Send Original
Injured Employee Statement	Copy	Copy	Email/ Fax**	Copy or Email	Send Original
AWP Request Form	Copy	Copy	NA	NA	Send Original
AWP Summary Sheet	Copy	Copy	NA	NA	Send Original
Work Status Report-DWC-73	Copy	Copy	Fax** & Mail Original (Tyler Tx)	Copy or Email	Fax & Send Copy

Effective 10/10/16:

WC TPA –**Claims Administrative Services Inc.**- P.O. Box 7500, Tyler Texas 75711-
Phone #: (915) 591-4181, FAX #: (903) 509-1888

Insurance & Benefits: 1st Floor, City Hall, 212-1275, FAX- 1-888-504-7142

HR Payroll: 1st Floor, City Hall, 212-1245, FAX 212-0047

You may scan any document directly to your adjuster**