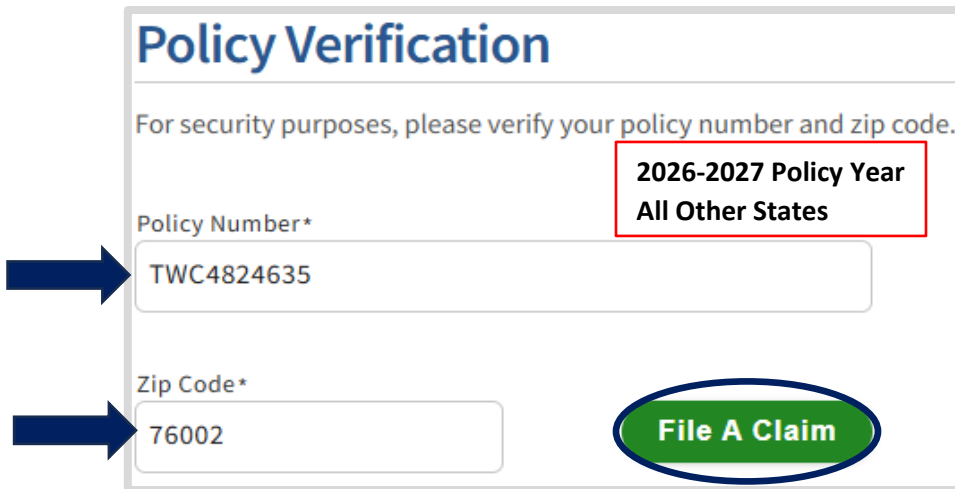


Introducing AmTrust Access

24/7 Online Claims Reporting Portal

AmTrust Access makes it easy! No login required. All fields with an asterisk are required. The more detailed information you provide, the better we can service your claim.

Start by clicking this link to report new claims via [AmTrust Access](#). Enter the **policy number and zip code as shown below** and click **File a Claim**.



Policy Verification

For security purposes, please verify your policy number and zip code.

Policy Number* 2026-2027 Policy Year
All Other States

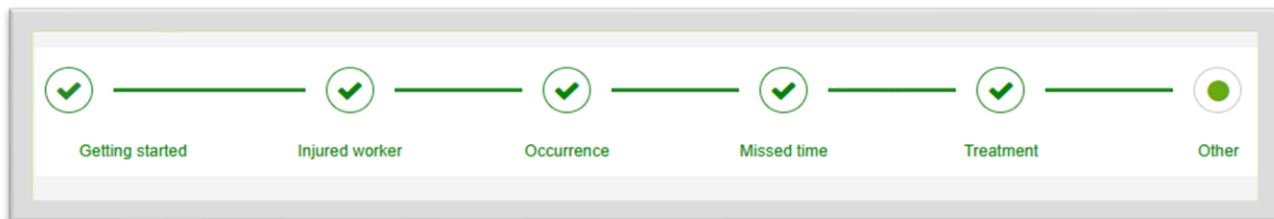
TWC4824635

Zip Code*

76002

File A Claim

Once you select **File A Claim**, complete the following screens to submit the claim.



- **Getting Started** – Provide your contact information and date of accident
- **Injured Worker** – Provide personal and employment information about the injured worker
- **Occurrence** – Tell us about the injury/illness you are reporting. Select the correct college location from the dropdown under Policy Location. This will prefill address fields.
- **Missed Time** – Provide return to work details
- **Treatment** – Tell us about any medical care that the injured worker sought
- **Other** – Provide witness names, your name and any additional comments or information that you would like the adjuster to know

You can upload any documents that you have related to the reported injury. Once you **Submit Claim**, you will be provided a claim number.