pennsylvania
DEPARTMENT OF LABOR & INDUSTRY
BUREAU OF WORKERS' COMPENSATION

REMEMBER: IT IS IMPORTANT TO TELL YOUR EMPLOYER ABOUT YOUR INJURY

The name, address and telephone number of your employer's workers' compensation insurance company, third-party administrator (TPA), or person handling workers' compensation claims for your company, are shown below.

Employer Name: Employment Enterprises Inc

Date Posted: 1/15/2025

IF INSURED:
(Complete all applicable spaces)

Name of Insurance Company: Zurich American Insurance Company of Illinois

Address: 1299 ZURICH WAY
SCHAUMBURG, IL 60196-5870

Telephone Number: 800-987-3373

Insurer Code: 2396

IF SOMEONE OTHER THAN INSURER IS HANDLING CLAIMS:
(Complete all applicable spaces)

Name of TPA (Claims administrator): GALLAGHER BASSETT

Address: PO BOX 4104
SCHAUMBURG, IL 60168-4104

Telephone Number: 877-942-3327

IF SELF-INSURED:
(Complete all applicable spaces)

Name of person handling claims at the self-insured: _____

Address: _____

Telephone Number: _____

Insurer Code: _____

IF SOMEONE OTHER THAN SELF-INSURER IS HANDLING CLAIMS:
(Complete all applicable spaces)

Name of TPA (Claims administrator): _____

Address: _____

Telephone Number: _____

Primary Insured/Employer Name:
Employment Enterprises Inc
Location Insured/Employer Name (DBA):

Any individual filing misleading or incomplete information knowingly and with the intent to defraud is in violation of Section 1102 of the Pennsylvania Workers' Compensation Act, 77 P.S. §1039.2, and may also be subject to criminal and civil penalties under 18 Pa. C.S.A. §4117 (relating to insurance fraud).

Employer Information Services
717.772.3702

Claims Information Services
toll-free inside PA: 800.482.2383
local & outside PA: 717.772.4447

Hearing Impaired
PA Relay 7-1-1

Email
ra-li-bwc-helpline@pa.gov

Auxiliary aids and services are available upon request to individuals with disabilities.
Equal Opportunity Employer/Program

LIBC-500 REV 09-22

10550 Linden Lake Plz Ste 200, Manassas, VA 20109-6495

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