



REQUIREMENTS FOR SELF-INSURED WORKERS' COMPENSATION SINGLE EMPLOYER

(per Tenn. Code Ann § 50-6-405 and Tenn. Comp. R & Reg. Ch. 0781-01-83)

Address & Contact Information Change

In order to update our records with all contact information changes: mailing address, contact's name, contact's email address, contact's phone number, and contact's fax number, please complete and submit your changes through your [CORE](#) account, online filing system.

