



Request for Sedgwick smart.ly Access

Purpose and Directions – For Authorized State Employees Only! Send completed form by email to <u>SOLAsecurityRequest@sedgwick.com</u> Your login name and initial password will be emailed to you within 3 business days. Do not share your login info. For login information or password resets please call (888)290-0895.

Select Line(s) of coverage for Internet Reporting:

Workers' Compensation Claims	Transportation Claims
General Liability Claims	Property Claims

Monthly Reports: Form is located on the Loss Analysis tab: http://www.laorm.com/forms/report_request.pdf

Today's Date:

First Name:	Last Name:	Email:
Job Title:	Telephone Number:	Address:

Your Agency's ORM 4 Digit Location Code(s) - To view an agency location code listing, please visit http://laorm.com/documents/loccodes.pdf

List **D** location/s **only if** you need access to <u>all</u> **S** and **L** locations under the **D** level. List **S** location/s **only if** you need access to <u>all</u> **L** locations under the **S** level Otherwise, list each **L** location you need access to. Attach a separate list if more locations are needed.

LEVEL (D,S, or L)	Location Code (4 digits)	Department or Agency/Div Name

Requested by:

(Signature of Person Requesting Access)

Supervisor's Name:

Email:

Job Title:

Phone Number:

Authorization: (system access must be approved by your agency's appointing authority) "I verify that the abovenamed individual is currently employed at the agency listed and I authorize this employee to report claims. I understand that should this person leave the agency or is assigned to another duty station; I am to email SOLAsecurityRequest@sedgwick.com within one working day of the employee's change in status."

Authorized by:(Print Name)

Authorized by: (Signature)

This section reserved for security use only	(22) GROUP – LA State Agencies Access Level		
Verified by			
Audited byon	ORM State Agency Version 2.91 (valid as of 7/7/2021)		

Legal Notice - By applying for and using your assigned login credentials, you agree to not disclose the information presented on screens and in system generated reports to any other person without a clear need or right to know. Information within this system may be protected by Federal and State privacy laws. Before sharing any information about a specific claim, person, or event, check with your supervisor or the claims adjuster assigned to the claim.