

													Water Mitigation Audit Results				
										Client Netwo	ork Vendor	W	/EM 1 & 2 Result	s		Fees	
Date Claim Received	Date Claim Assigned	Date Claim Closed	Assigned Cycle Time - Business Davs	eProperty ID No.	Claimant Last Name	Client Claim No.	Loss State	Adjuster Name	Yes or No or N/A	Water Mitigation Vendor	Vendor City, State, and Zip			WEM Variance	WEM1	Full Service	Total \$s
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