

---

Health Loss/Assessment Report

-----

Claim ID: CLM-2025-0039-HEA

Inspection Date: 2025-10-13

Loss Date: 2025-10-08

Inspection Location: Indore Center

Injuries Reported: True

Estimated Damage Cost: -63326

Approved Repair Amount: -56993

Total Loss: False

Claim Status: Approved

Medical Notes: Recovery ongoing