



HM SENIOR CORONER
BIRMINGHAM AND SOLIHULL DISTRICTS

*Completed form to be given to the Family and a copy to be sent to the
Coroner's Office via email: deathnotification@birmingham.gcsx.gov.uk*

TO BE COMPLETED BY GP/HOSPITAL DOCTOR ISSUING MCCD
FOR REMOVAL OF BODY OUT OF ENGLAND

**THIS IS AN IDENTIFICATION FORM AND NOT THE PAPERWORK REQUIRED
FOR THE REMOVAL OF THE BODY OUT OF ENGLAND, THE CORRECT
PAPERWORK MUST BE OBTAINED FROM THE CORONER'S OFFICE
FOLLOWING REGISTRATION OF THE DEATH**

Confirmation of identity of the deceased

I Dr
[insert name and status of Doctor and GMC number] hereby confirm that I have treated
.....[insert name of patient] during
his/her last illness and have seen the deceased within the last 14 days or after death.

I can confirm the identity of the deceased is.....[insert
deceased name], Passport Number.....[insert number], Passport
expiry date..... [insert date] and his/her body has been identified by me
and by his/her relatives.....
.....[insert name, address and status of relatives]
on.....[insert date and time] at[insert
place].

Signed

Dated