

**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: coroner@birmingham.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 the 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 **Click here**  body has been identified by me and by Click here relatives **Insert name, address and status of relatives** on **Click here to enter a date.** at **Insert time** at **Insert place** .

Signed

Dated

Updated March 2019