

NOTIFICATION OF DEATH

NORTH CAROLINA
DEPARTMENT OF HEALTH AND HUMAN SERVICES
N.C. VITAL RECORDS

LOCAL REGISTRAR'S COPY

Name of Deceased			Date of Death	
First	Middle	Last		
Place of Death			City	County
Name of Institution or Street Address				
Name			Address	
Attending Physician Medical Examiner*				
Name		Telephone No.	Address	
Funeral Home				
Signature of Authorized Representative				Date Signed

***FOR MEDICAL EXAMINER CASES ONLY** — I certify that the body of the above-named decedent has been released by the above-named medical examiner for final disposition.

Signature: _____
Funeral Director or Authorized Representative

IMPORTANT NOTICE

The funeral director who first assumes custody of a body must:

1. File a Notification of Death with the local registrar of the district in which death occurred within 24 hours after taking possession of the body, and
2. File a death certificate within 5 days after death.

See back of this form for instructions pertaining to burial transit permits for Medical Examiner cases and removals from the state.

FOR LOCAL REGISTRAR'S USE ONLY

Notification of Death			Date Received	
Death Certificate		Date Due	Date Received	Date Filed with Register of Deeds
Follow-up Efforts and Activities (Note parties and dates contacted)				

NOTIFICATION OF DEATH

NORTH CAROLINA
DEPARTMENT OF HEALTH AND HUMAN SERVICES
N.C. VITAL RECORDS

FUNERAL DIRECTOR'S COPY

Name of Deceased			Date of Death
First	Middle	Last	
Place of Death		City	County
Name of Institution or Street Address			
Name		Address	
Attending Physician Medical Examiner*			
Name	Telephone No.	Address	
Funeral Home			
Signature of Authorized Representative			Date Signed

*FOR MEDICAL EXAMINER CASES ONLY — I certify that the body of the above-named decedent has been released by the above-named medical examiner for final disposition.

Signature: _____
Funeral Director or Authorized Representative

IMPORTANT NOTICE

The funeral director who first assumes custody of a body must:

1. File a Notification of Death with the local registrar of the district in which death occurred within 24 hours after taking possession of the body, and
2. File a death certificate within 5 days after death.

See back of this form for instructions pertaining to burial transit permits for Medical Examiner cases and removals from the state.

FOR FUNERAL DIRECTOR'S USE ONLY

Notification of Death		Date Mailed or Delivered
Death Certificate	Date Due	Date Filed
Follow-up Efforts and Activities (Note parties and dates contacted)		

REQUIREMENTS FOR BURIAL-TRANSIT PERMITS

Medical Examiner Cases

The signature of the medical examiner on the original certificate of death is the only requirement for final disposition, removal from the State or cremation in cases under the jurisdiction of the medical examiner.

Non-Medical Examiner Cases

Out-of-State Removals: An Out-of-State Burial-Transit Permit must be obtained from the local registrar of the county in which death occurred before moving a body across State lines. As much information as possible, necessary for completing the death certificate, must be collected and a Notification of Death must be filed prior to issuance of an Out-of-State Burial-Transit Permit.