



Devdutta Sangvai, MD  
*Secretary*

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### **Authorization for Release of Remains**

This form must be completed by the funeral home/mortuary agency handling the decedent's remains and must be presented to OCME staff in order to release the decedent.

#### **DECEDENT INFORMATION:**

DECEDENT NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

DATE OF DEATH: \_\_\_\_\_

#### **NEXT-OF-KIN INFORMATION:**

North Carolina General Statutes (130A-420) defines next-of kin in this order as: (1) The spouse; (2) An adult child; (3) Either parent; (4) An adult sibling; (5) A guardian of the person of the decedent at the time of the decedent's death; or (6) Any other person authorized or under obligation to dispose of the body

NAME: \_\_\_\_\_

RELATIONSHIP: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

#### **FUNERAL HOME INFORMATION:**

Transportation services may pick up decedents from the Office of the Chief Medical Examiner between the hours of 8:00 am and 4:30 pm Monday – Saturday including most state holidays. Transporters may call 919-743-9010 during business hours to verify decedent pick up.

FUNERAL HOME: \_\_\_\_\_

CITY/STATE: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

TRANSPORTER (If different than the funeral home): \_\_\_\_\_

**NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF PUBLIC HEALTH**  
**OFFICE OF THE CHIEF MEDICAL EXAMINER**

LOCATION: 4312 District Drive, Raleigh, NC 27607  
MAILING ADDRESS: 3025 Mail Service Center, Raleigh, NC 27699-3025  
[www.ocme.dhhs.nc.gov](http://www.ocme.dhhs.nc.gov) • TEL: 919-743-9000 • FAX: 919-743-9099

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