

1st Call Transport Notification

What firm are we representing? _____

Caller Name: _____ Ph: _____

Name of deceased? _____

Deceased location/address? _____

If House:

Where are they located in the house? (ie. 1st, 2nd, 3rd, bed, floor, toilet) _____

Approximate weight? _____

Was Hospice or Police notified? **Y** **N**

Next of Kin: Contact Name: _____ Ph: _____

When you are on site, (obtain **Hospice Dr info/TOD, Police Report#**)

Dr Name: _____

Dr Ph: _____ Dr Fax: _____

Time of Death: _____ Police Report # _____

If Hospital:

Hospital Name: _____

Hospital address: _____

Hospital Ph: _____ Hospital Fax: _____

Inform Caller to: "fax release to 866.540.5702, or email to: 1stcallmortuary@gmail.com

Inform Caller "transport has been scheduled"

Call Hospital and verify body is ready for p/u, & that they have received release: **Y** **N**

Special Instructions: _____
