



**DEPARTMENT OF HEALTH & MENTAL HYGIENE  
OFFICE OF CHIEF MEDICAL EXAMINER**

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World Trade Center Operations  
520 First Avenue, New York, NY 10016  
WTC Hotline: (212) 447-7884 Fax: (212) 779-1223

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**Notification Request Form**

Should future testing result in the identification of remains, the Office of Chief Medical Examiner will make their best effort to follow the wishes of the family regarding notification.

Name of Decedent \_\_\_\_\_ RM or P/T Number: \_\_\_\_\_

In the event of the identification of remains for the above listed World Trade Center victim:

1.  I **do not** wish to be notified.

2.  I **wish to be** notified in the following manner:

a.  Notify me personally: \_\_\_\_\_  
(Name and phone number)

b.  Notify the following person (please indicate their relationship to you):

\_\_\_\_\_  
(Name and phone number)

I certify that I have read this form and have indicated my wishes above.

Print Name: \_\_\_\_\_ Relationship to Deceased: \_\_\_\_\_

Address: \_\_\_\_\_ Phone \_\_\_\_\_

Signed: \_\_\_\_\_ Date Signed: \_\_\_\_\_

Witnessed: \_\_\_\_\_ Print Witness Name: \_\_\_\_\_

The Office of Chief Medical Examiner maintains a World Trade Center Hotline at 212-447-7884. We encourage families to call this number with any questions or to update their contact information. Please note that we will attempt to contact you to confirm receipt of this document.

***For Internal Use:***

Date received: \_\_\_\_\_

\_\_\_\_\_ Verification Completed \_\_\_\_\_ Receipt Confirmed with Family Member