



Michael J. Nesheiwat, MD
Chief Coroner
Putnam County Coroner
112 Old Route 6
Carmel, NY 10512

The following guidelines have been elucidated by the Putnam County Department of Law for the release of autopsy reports:

Under New York statutory law, autopsy reports are specifically exempted from public disclosure under the Freedom of Information Law. Thus, **AUTOPSY REPORTS ARE TO BE RELEASED BY THE PUTNAM COUNTY CORONER ONLY IN THE FOLLOWING SITUATIONS:**

1. Autopsy reports shall be open for inspection, upon request of the Putnam County District Attorney.
2. Autopsy reports shall be made available to the spouse of the deceased, upon presentation of a valid picture identification*, issued by a government entity, a valid marriage license* or death certificate*, and a notarized Request For Autopsy Report.
3. Autopsy reports shall be made available to the personal representative of the estate of the deceased, upon presentation of a valid picture identification* issued by a government entity, and valid letters administration or letters testamentary* issued by the Surrogate Court.
4. Autopsy reports shall be made available to a parent of the deceased, upon presentation of a valid picture identification* issued by a government entity, and the birth certificate or death certificate* of the deceased.
5. Autopsy reports shall be made available to the next of kin of the deceased, upon presentation of a valid picture identification* issued by a government entity, presentation of a death certificate of the deceased*, and submission of a notarized Affidavit of Kinship, obtained from the Office of the Putnam Country Coroner.
6. Autopsy reports shall be made available upon an Order of a court of record or a Justice of the Supreme Court.

If a request falls within any of the above enumerated situations, the Putnam County Coroner has authority to release a copy of an autopsy report; all other requests must be denied.

ALL REQUESTS AND DOCUMENTATION SHOULD BE SENT TO:

Michael J. Nesheiwat MD
Putnam County Coroner's Office
112 Old Route 6
Carmel, NY 10512

***Photocopies acceptable.**



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REQUEST FOR AUTOPSY REPORT—NEXT OF KIN

1. Name of Deceased: _____
2. Date of Death: _____
3. Address of Deceased: _____
4. Name of Requester: _____
5. Address: _____

6. Telephone Number: _____
7. Relationship to Deceased: _____

FOR CORONER'S OFFICE USE ONLY:

- Date Request Received: _____
- Documentation Received: _____
- Release of Autopsy Report: (Signature & Date): _____

AFFIDAVIT OF KINSHIP

STATE OF NEW YORK)
COUNTY OF) ss.:

_____, residing at _____

_____, being duly sworn, deposes and says:

1. State your relationship to the decedent: _____

2. State the decedent's last residence: _____

3. State the decedent's date and place of birth: _____

4. State the decedent's last known occupation and place of business: _____

5. Was the decedent married? _____

If yes, list how many times and to whom (if predeceased, list date of death): _____

6. Was the decedent divorced? _____

If yes, list how many times and to whom (if predeceased, list date of death): _____

7a. How many children did the decedent have? _____

If any, list their names and dates of birth: _____

7b. Were there any adopted or out-of-wedlock children? _____

If any, list their names and dates of birth: _____

7c. Were there any children who died before the decedent? _____

If any, list their names and dates of death: _____

8a. How many grandchildren did the decedent have? _____

If any, list their names and dates of birth: _____

8b. Were there any grandchildren who died before the decedent? _____

If any, list their names and dates of death: _____

9a. Who was the decedent's mother and her date of birth (if predeceased, list date of death)? _____

9b. Who was the decedent's father and his date of birth (if predeceased, list date of death)? _____

10a. How many siblings did the decedent have? _____

If any, list their names and dates of birth: _____

10b. Were there any siblings who died before the decedent? _____

If any, list their names and dates of death: _____

11. Who were the decedent's paternal grandparents (if predeceased, dates of death)? _____

12. Who were the decedent's maternal grandparents (if predeceased, dates of death)? _____

13. Who were the decedent's paternal aunts and uncles (if predeceased, dates of death)? _____

14. Who were the decedent's maternal aunts and uncles (if predeceased, dates of death)? _____

UNDER THE PENALTIES OF PERJURY, I HEREBY SUBMIT THE ABOVE
INFORMATION.

Signature

Print Name

Sworn to before me this _____

Day of _____, 20_____

Notary Public