

# AIR AMBULANCE AVIATION

The Flying ICU On Space



Air Ambulance Aviation  
Welcome to safe and secure  
Death body transfer (Human Remain)  
By flight in everywhere in the world

## International Sector form

[Domestic form](#), [international form](#)

Looking for to transfer your love once, just print and keep with you it will be help in all the ways

**Only 3three steps** Only 3 simple procedures

- 1 Make call to the rescue controller
- 2 Send the documents to [info@airambulance.co.in](mailto:info@airambulance.co.in) make the payment
- 3 Ready to receive the you're loved once

Can I explain?

1. Make call to the rescue controller just [clicking this link](#), ad say I need to shift my love once?
2. Please print this documents fill with respective people and scan and send back to [info@airambulance.co.in](mailto:info@airambulance.co.in), and pay the currency of expenses
3. Get ready to receive the Death body, human remain, late your love once

Documents for domestic dead body transfer

- Original passport / driving licence / voter id card (issued from the respective authority)
- Death certificate from respective hospital
- Embalming Certificate. (Who packs the body (Medical/ police forensic))
- No objection from local police. Body should be packed in coffin in sealed condition.
- Contact detail and address of consignee who will take the delivery at the air port
- No objection from Respective consulate
- Kindly ensure following documents are checked and send in document pouch along with HUM.

Details	Dispatcher Airport	Arrival Airport
Name of the authorize person in the air port		
Address in full		
Phone no		
Mobile no		
Email id		

Terms and conditions to be apply

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**DEPARTMENT OF ANATOMY**  
**Certificate of Embalming**

Date...../...../.....

Embalming certificate no .....E verifications no\*.....

This is to certify that the dead \ postmortem body of late Mr.\Mis\Miss\ Baby of \ Daughter \Son\Wife\ Dr\ Prof\..... aged at .....sex (tick) (male \female\ hermaphrodite\ androgynous ) a \an..... national , brought to the department from ..... where he\she \ hermaphrodite\ androgynous died \ where he\she \ hermaphrodite\ androgynous postmortem down, is embalmed in the department of anatomy , embalming assures that the body is not hazardous to public health.

The death certificate \ certificate of postmortem and no objection certificate from the police authorities\ embassy \ high commission \mission for embalming this dead body , has/ have been seen by me , and found in order .

The body, after embalming is handed over to the claimants, who brought to it this departments

Signature of the faculty department.....

With official seal .....  
...

Received the certificate of the late .....  
Signature of the claimant .....  
With her / his full address .....  
Name .....  
Address.....  
.....  
Email id .....  
Phone no .....  
Passport no of body (international body(human remain) is compulsory)  
.....

\* For checking the genuine document you can send this scan copy or E verifications no to [info@airambulance.co.in](mailto:info@airambulance.co.in) you will get the replay of from official replay



**Death certificate**

Death certificate no .....E verifications no\* ..... Date ...../...../.....

This is certify that Mr./Ms/Dr/Pro/.....  
.....Age.....Sex.....Who admitted...../...../.....  
/ brought death /died on ...../...../..... In ..... Time  
...../Am / pm Passport number / driving llicence number/ Government id card  
number .....

Cause of death

.....  
.....  
.....  
.....  
.....  
.....  
.....

Inspecting Doctor Name  
Reg no .....

Official seal

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(To be detached and handover to the relative of the deceased/ clime)

Certificate that Sri  
/Smt/kum/Mr/Mis/Miss/Mrs/Dr/Prof.....c/o.....  
..... was expired on ..... At this...../am/pm  
time in this place

Doctor .....



**Death Summery**

Death summery no .....E verifications no\* .....

Name of the patent ..... Admission date .....

Age ..... Date of death and time .....

Admitting Dr Name ..... Identifications marks of the patents .....

Specialty .....

Location .....

Patent id .....

Gender .....

Attending practitioner .....

**DEATH SUMMERY**

Date of death and time;.....

Clinical diagnosis;.....

.....

Cause of death ;.....

.....

.....

Immediate cause ;.....

Antecedent cause ;.....

.....

Other significant conditions contributing to the death, but not related to the disease or conditions causing it ;.....

.....

History of resent illness ;.....

.....

.....

Past medical records;.....

.....

Hospital course .....

.....

.....

Name And Signature;.....

Physician preparing the report

;

Name of Medical staff president;.....

Official seal

Date...../...../..... Time ...../...../am /pm / Place .....

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From

THE HIGH COMMISSION/ EMBASSY OF .....

Address

.....  
.....  
.....

Refs no ..... date ...../...../.....

## **TO WHOM IT MAY CONCERN**

Name of the human remain late .....

The above named, now late, was a..... citizen , travelling on the

passport no ..... c/o died in ..... on

...../...../..... Time ...../...../ am/ pm due to .....

This is confirming that THE HIGH COMMISSION/ EMBASSY OF .....

Has **NO OBJECTION to** the transportation of the mortal remains of late

..... from

..... To ..... by air for his/her funeral rites

Authorize Name Sign

Official seal

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From

THE HIGH COMMISSION/ EMBASSY OF .....

Address

.....  
.....  
.....

Refs no ..... date ...../...../.....

To

Controller of customs

.....  
.....  
.....

Dear Sir

This is certify that coffin containing the human remain of late, was

a..... citizen, travelling on the passport no .....

c/o died in ..... on ...../...../..... Time

...../...../ am/ pm due to ..... Have been sealed in our presence

Kindly extend your cooperation in facilitating its shipment from

..... To .....

With regards

Authorize Name Sign

Official seal

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THE HIGH COMMISSION/ EMBASSY OF .....

Address

.....  
.....  
.....

Refs no ..... date ...../...../.....

To

Air Ambulance Aviation or associated air lines

Dear sir

This is to certify that, the coffin containing the human remains of of late, was

a..... citizen, travelling on the passport no .....

c/o died in ..... on ...../...../..... Time

...../...../ am/ pm due to ..... have been sealed in our presence

Kindelly extend your cooperation in facilitating its shipments from

..... To .....

With regards

Authorize Name Sign

Official seal

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From

THE HIGH COMMISSION/ EMBASSY OF .....

Address

.....  
.....  
.....

Refs no ..... date ...../...../.....

To

Police station

.....

Subject; the handing over the body of ..... National  
This is to inform you that's the human remains of late, was a.....

citizen, travelling on the passport no ..... c/o expired in

..... on ...../...../..... Time ...../...../

am/ pm due to ..... his/ her body is to be flown to ..... For

last rites

The high commission shall there for , appreciate I you could kindly extend your  
cooperation in handling over the body of late

.....

.....

Thanking you

Yours faithfully

Authorize Name Sign

Official seal

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THE HIGH COMMISSION/ EMBASSY OF .....

Address

.....  
.....  
.....

Refs no ..... date ...../...../.....

To

The health officer

.....

Dear Sir,

Subject; DEATH OF A ..... NATIONAL

This is to inform you that's the human remains of late, was a.....  
citizen, travelling on the passport no ..... c/o expired in  
..... on ...../...../..... Time ...../...../  
am/ pm due to ..... his/ her body is to be flown to ..... For  
last rites

The high commission shall there for appreciate if you could kindly extend your  
cooperation in necessary No Objection letter

The bear of this latter who is approved to undertake is hereby authorize to complete the  
formalities on behalf of the high commission

Name

Address

For high commission

Name

Sign and official seal

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From

Police station .....

Address

.....  
.....  
.....

Refs no ..... date ...../...../.....

## **TO WHOM IT MAY CONCERN**

Name of the human remain late .....

The above named, now late, was a..... citizen , travelling on the

passport no ..... c/o died in ..... on

...../...../..... Time ...../...../ am/ pm due to .....

This is confirming that THE LOCAL POLICE STATION OF ..... Has **NO**  
**OBJECTION to** the transportation of the mortal remains of late

.....  
from..... to ..... by air for his/her funeral  
rites

Authorize Name Sign

Official seal

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