

HOW DO I SUBMIT AMENDMENTS TO TAKE OWNERSHIP OF CITY BURIALS OR INTERIM DISPOSITIONS AND AMEND DISPOSITION IN EVERS?

Funeral directors may submit amendments to take ownership of City burials or Interim Dispositions and amend disposition in EVERS for FULLY ELECTRONIC CASES ONLY. There is no corrections fee for city or interim to private, and city or interim to cremation amendments.

All orders for certified copies will be processed after the amendment has been approved.

Note: You must enter and affirm city burial/interim disposition amendments in one EVERS session. You will not be able to locate incomplete or rejected city burial/interim disposition amendments, when you navigate away from the amendment, since your funeral home does not yet own it.

OVERVIEW OF FUNERAL HOME DISPOSITION AMENDMENTS

TYPE 1: PICKING UP A CITY BURIAL or INTERIM DISPOSITION FOR PRIVATE BURIAL (Non-Cremation)

Submit a City to Private (Non-Cremation) Amendment type

You **must** change the following items to **own** the case:

- a. Funeral Director's name
- b. Funeral Home name

Please Note: You must submit changes to all the respective fields and pages within this amendment. If you do not, you will have to submit a personal amendment later for which you will have to pay a \$40 correction fee.

After amendment is approved, submit the \$40 Disposition Permit Fee to print the burial permit

TYPE 2: PICKING UP A CITY BURIAL or INTERIM DISPOSITION FOR CREMATION

STEP 1: Submit City to Cremation 1 Amendment type to become the owner of the case

You **must** change the following items on the **Informant** and **Disposition** page to **own** the case:

- a. Informant's Name and Relationship to Decedent
- b. Informant's Address
- c. Individual Authorizing Disposition
- d. Funeral Director
- e. Funeral Home

AFTER receiving approval for the City to Cremation 1 Amendment type, proceed to step 2

STEP 2: Submit Cremation Request to OCME via the Other Links menu

AFTER receiving approval for the Cremation Clearance from OCME, proceed to step 3

STEP 3: Submit City to Cremation 2 Amendment to Change All the Respective pages.

After amendment is approved submit the \$40 Disposition Permit Fee to print the burial permit

TYPE 3: CHANGING DISPOSITION TO CITY BURIAL

Submit the \$40 Corrections Fee **first** before starting the amendment

Submit a **Personal Amendment** type to change disposition items.

- a. **Method of Disposition:** It should be Other Specify, City Burial (Potter's Field).
- b. **Date of Disposition:** It should be the date that the body will be transported to OCME.
- c. **Place of Disposition:** It should be City Cemetery at Hart Island, Bronx, New York, United States.

Do NOT remove your funeral Home name and Funeral Director name.

FUNERAL HOME DISPOSITION AMENDMENTS

Note: You can only submit amendments for cases that have a **Registered Status**

TYPE 1: PICKING UP A CITY BURIAL or INTERIM FOR PRIVATE BURIAL (Non-Cremation)

Submit a **City to Private (Non-Cremation) Amendment type**

Find the City burial or Interim case by using the **Start/Edit New Case** link. After finding the case, click Preview to verify that you have the correct decedent.

Colonial Funeral Home

Main Order Processing Life Events Queues For -

The City

Death Locate Case
Fetal Death Start/Edit New Case
ITOP and Mental Hygiene

Results

Case Id	Decedent's Name	Date of Death	Gender	Place of Death	Date of Birth	
427785	Mickey, Little	APR-17-2013	Male	Bronx	999-99-9999	Preview

Total records : 1

If case does not appear above, start new case New Search

Click **Select** to access the case.

Main Order Processing Life Events Queues Forms Help

The City of New York Department of Health and Mental Hygiene

Results

Case Id	Decedent's Name	Date of Death	Gender	Place of Death	Date of Birth	
427785	Mickey, Little	APR-17-2013	Male	Bronx	999-99-9999	Select

Total records : 1

If case does not appear above, start new case New Search

Preview

Case Id: 427785 ME Case Number:
Decedent's Name: Little Mickey Date of Death: APR-17-2013
Spouse's Name: Marital Status: Never Married
Sex: Male Date of Birth: 999-99-9999 SSN: None
City or Town of Death: Bronx Borough: Bronx
Place of Death: Calvary Hospital
Residence: Brooklyn New York, United States
Mother's Maiden Name: Unknown Unknown
Funeral Director: Robert Kearney
Funeral Home: Office of Chief Medical Examiner, 520 First, New York
Medical Certifier: Maya Feldman
Date Entered: NOV-06-2009 Last Update Made By: Maya Feldman
Status: /Personal Valid With Exceptions/Fact of Death Valid/Medical Valid With Exceptions/Registered/Signed/Pronounced/Certified/NA/ICD Coding Required/GIS Coding Required/Burial Permit Ready to Print

Done Local intranet 100%

Select **Amendments** in **Other Links** menu.

Colonial Funeral Home Welcome back: MayaFD Logout

Main Order Processing Life Events Queues Forms Help

The City of New York Department of Health and Mental Hygiene

427785 :Little Mickey APR-17-2013 Amendment Exists
/Personal Valid With Exceptions/Fact of Death Valid/Medical Valid With Exceptions/Registered/Signed/Pronounced/Certified/NA/ICD Coding Required/GIS Coding Required/Burial Permit Ready to Print

Decedent

Will medical institution be responsible for final disposition? Yes

Infant Identifier

Decedent Name Presumed? Confirmed ID

Decedent's Legal Name

First	Middle	Other Middle	Last	Suffix
Little			Mickey	

Aliases

Add/Edit Alias Names

Gender: Male Social Security Number: 000-00-0000

Date of Birth: Under 1 Year Under 1 Day

SSN Verification Status

Other Links

- Amendments
- Comments
- Order Permit/Copies
- Print Forms
- Validate Registration

Main Order Processing Life Events Queues Forms Help

The City of New York Department of Health and Mental Hygiene

427785 :Little Mickey APR-17-2013 Amendment Exists
/Personal Valid With Exceptions/Fact of Death Valid/Medical Valid With Exceptions/Registered/Signed/Pronounced/Certified/NA/ICD Coding Required/GIS Coding Required/Burial Permit Ready to Print

Amendment Page

Type: City to Private (Non-Cremation) Amendment Date

Year

Order Number

Amendment Status

New Burial Permit Required

Amendment Number

Description: City to Private Amendment

Microfilm Number

Save Clear Return

Click Save

Select City to Private (Non-Cremation) and enter a description.

Select **Page to Amend** from the drop down.

Main Order Processing Life Events Queues Forms Help

The City of New York Department of Health and Mental Hygiene

427785 :Little Mickey APR-17-2013 Amendment Exists
/Personal Valid With Exceptions/Fact of Death Valid/Medical Valid With Exceptions/Registered/Signed/Pronounced/Certified/NA/ICD Coding Required/GIS Coding Required/Burial Permit Ready to Print

Amendment Page

Type: City to Private (Non-Cremation) Amendment Date: MAY-02-2013

Year: 2013 Amendment Number: 21930

Order Number

Amendment Status: Keyed (Requires Affirmation) Description: City to Private Amendment

Microfilm Number

Page to Amend

- Item In Error
- Death - Decedent
- Death - Family Members
- Death - Informant
- Death - Disposition
- Death - Resident Address
- Death - Decedent Attributes

New Burial Permit

Item as it Should be Edit Delete

Cancel Amendment Save Clear Return

The page you want to amend will appear below for you to make the corrections.

Please Note: You must submit changes to all the respective pages within this amendment. If you do not, you will have to submit a personal amendment later for which you will have to pay a \$40 correction fee.

You **must** change the following on the **Disposition** page to become the owner of the case.

- a. Funeral Director's name
- b. Funeral Home's name and address

Use the eraser  to remove the current information, and use the lookup  to enter the new information.

Submit changes to all the respective pages.

You will see a summary for all the pages: **Item in Error**, **Item as it Appears**, and **Item as it Should be**.

The screenshot shows the 'Amendment' web application interface. On the left is a navigation menu with options like 'Resident Address', 'Family Members', 'Informant', 'Disposition', 'Decedent Attributes', 'Medical Certification', 'Cause of Death', 'Registrar', 'Amendment List', 'Other Links', 'Amendments', 'Comments', 'Order Permit/Copies', 'Print Forms', and 'Validate Registration'. The main area displays a table with columns: 'Amendment Status', 'Keyed (Requires Affirmation)', and 'Microfilm Number'. Below this is a 'Page to Amend' dropdown and a table with three columns: 'Item In Error', 'Item as it Appears', and 'Item as it Should be'. Each row in this table has 'Edit' and 'Delete' buttons. At the bottom right are buttons for 'Cancel Amendment', 'Save', 'Clear', and 'Return'. A callout points to the 'Cancel Amendment' button with the text: 'Click here only if you wish to Cancel the amendment.' Another callout points to the 'Edit' and 'Delete' buttons with the text: 'Click Edit if you wish to change the information entered. Click Delete if you wish to remove the information entered.'

Item In Error	Item as it Appears	Item as it Should be	Edit	Delete
Disposition-Method of Disposition	Interim Disposition	Burial (Not Potter's Field)	Edit	Delete
Disposition-Date of Disposition		MAY-07-2013	Edit	Delete
Place Of Disposition - Place of Disposition System Generated Id	761303	44	Edit	Delete
Disposition-Place Name	OCME Morgue	Acacia Cemetery	Edit	Delete
Disposition-Place City	Staten Island	New York	Edit	Delete
Place Of Disposition - Funeral Director System Generated Id		1165254	Edit	Delete
Disposition-Funeral Director License Number		12456	Edit	Delete
Disposition-Funeral Director First Name	Robert	Patricia	Edit	Delete
Disposition-Funeral Director Last Name	Kearney	Gentles	Edit	Delete
Place Of Disposition - Funeral Home System Generated Id	118	236884		
Disposition-Funeral Home Name	Office of Chief Medical Examiner	Colonial Funeral Ho		
Disposition-Funeral Home Business Registration Number		00354		
Disposition-Funeral Home Street Number	520	2819		
Disposition-Funeral Home Street Name	First	Hylan		
Disposition-Funeral Home Street Designator	Avenue	Boulevard		
Disposition-Funeral Home Address City	New York	Staten Island		
Disposition-Funeral Home Address Zip Code	10016	10306		

Click **Amendment Affirmation** to sign the amendment

The screenshot shows the 'Amendment Affirmation' web application interface. At the top is a navigation bar with 'Main', 'Order Processing', 'Life Events', 'Queues', 'Forms', and 'Help'. Below is the header 'The City of New York Department of Health and Mental Hygiene'. The main content area shows 'Amendments Menu' with 'Amendment Affirmation' selected. The page title is '427785 :Little Mickey APR-17-2013 Amendment Exists'. Below the title is a list of codes: '/Personal Valid With Exceptions/Fact of Death Valid/Medical Valid With Exceptions/Registered/Signed/Pronounced/Certified/NA/ICD Coding Required/GIS Coding Required/Burial Permit Ready to Print'. Under 'Affirmations', it says 'Affirm the following:' and has a checked checkbox: 'I certify that this change is being requested due to error or newly received information. (Note: Applications requiring documentary evidence cannot be submitted electronically.)'. At the bottom right is a biometric device icon labeled 'Place Finger'. A callout points to this icon with the text: 'Have the Funeral Director place his/her finger on the biometric device to affirm the amendment'. At the bottom are buttons for 'Affirm', 'Clear', and 'Return'.

You will get a message once the amendment is **Approved**.

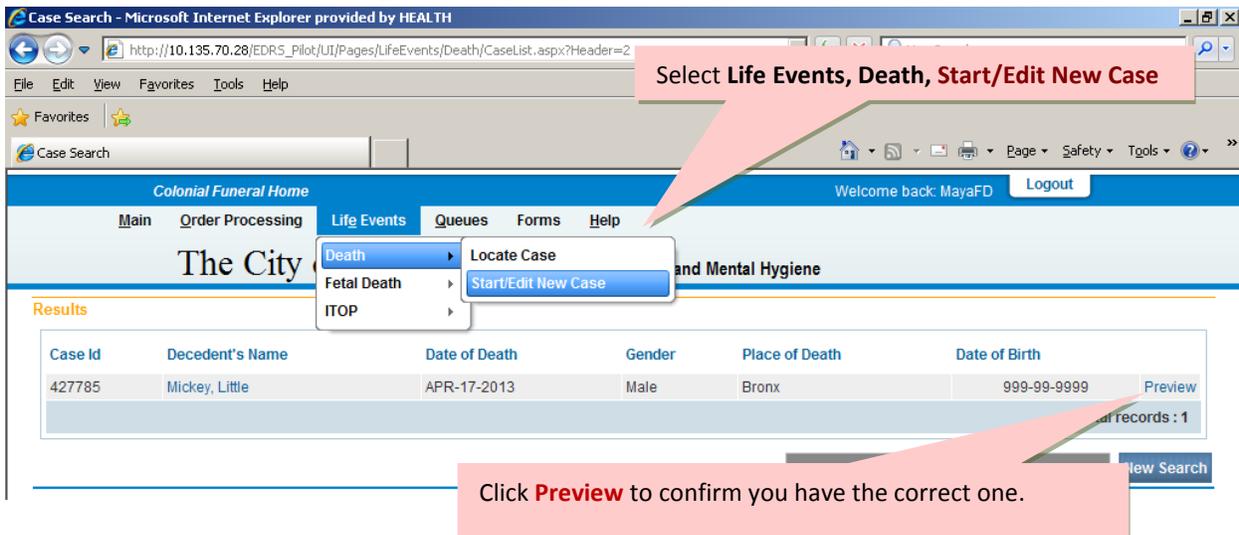


You will now need to submit payment for a disposition permit to print it. *Refer to How do I order death certificate-related services in EVERS for instructions.*

TYPE 2: PICKING UP A CITY BURIAL or INTERIM FOR CREMATION

STEP 1: Submit a City to Cremation 1 Amendment type to become the owner of the case

Find the City burial case by using the **Start/Edit New Case** link.



Click **Select** to access the case.

Main **Order Processing** **Life Events** **Queues** **Forms** **Help**

The City of New York Department of Health and Mental Hygiene

Click Select

Results

Case Id	Decedent's Name	Date of Death	Gender	Place of Death	Date of Birth	
427785	Mickey, Little	APR-17-2013	Male	Bronx	999-99-9999	Select

Total records : 1

If case does not appear above, start new case **New Search**

Preview

Case Id: 427785
Decedent's Name: Little Mickey
Spouse's Name: Marital Status: Never Married
Sex: Male Date of Birth: 999-99-9999
City or Town of Death: Bronx
Place of Death: Calvary Hospital
Residence: Brooklyn New York, United States
Mother's Maiden Name: Unknown Unknown
Funeral Director: Robert Kearney
Funeral Home: Office of Chief Medical Examiner, 520 First, New York
Medical Certifier: Maya Feldman
Date Entered: NOV-06-2009
ME Case Number:
Date of Death: APR-17-2013
SSN: None
Borough: Bronx
Last Update Made By: Maya Feldman
Status: /Personal Valid With Exceptions/Fact of Death Valid/Medical Valid With Exceptions/Registered/Signed/Pronounced/Certified/NA/ICD Coding Required/GIS Coding Required/Burial Permit Ready to Print

Done Local intranet 100%

Select **Amendments** in **Other Links** menu.

Colonial Funeral Home Welcome back: MayaFD Logout

Main **Order Processing** **Life Events** **Queues** **Forms** **Help**

The City of New York Department of Health and Mental Hygiene

Death Registration Menu

- Personal Information
- Decedent**
- Resident Address
- Family Members
- Informant
- Disposition
- Decedent Attributes
- Medical Certification
- Cause of Death
- Registrar
- Amendment List
- Other Links
- Amendments**
- Comments
- Order Permit/Copies
- Print Forms
- Validate Registration

427785 :Little Mickey APR-17-2013 Amendment Exists
/Personal Valid With Exceptions/Fact of Death Valid/Medical Valid With Exceptions/Registered/Signed/Pronounced/Certified/NA/ICD Coding Required/GIS Coding Required/Burial Permit Ready to Print

Decedent

Will medical institution be responsible for final disposition? Yes

Infant Identifier

Decedent Name Presumed? Confirmed ID

Decedent's Legal Name

First	Middle	Other Middle	Last	Suffix
Little			Mickey	

Aliases

Add/Edit Alias Names

Gender: Male Social Security Number: 000-00-0000

None Unknown

Date of Birth: Years Months Days Hours Minutes SSN Verification Status

Colonial Funeral Home Welcome back: MayaFD Logout

Main Order Processing Life Events Queues Forms Help

The City of New York Department of Health and Mental Hygiene

Amendments Menu
Amendment
Amendment Affirmation

Death Registration Menu
Personal Information
Decedent
Resident Address
Family Members
Informant
Disposition
Decedent Attributes
Medical Certification
Cause of Death
Registrar
Amendment List
Other Links
Amendments
Comments
Order Permit/Copies
Print Forms
Validate Registration

427785 :Little Mickey APR-17-2013 Amendment Exists
/Personal Valid With Exceptions/Fact of Death Valid/Medical Valid With Ex
Required/GIS Coding Required/Burial Permit Ready to Print

Amendment Page

Type City to Cremation 1 Amendment Date MAY-02-2013
Year 2013 Amendment Number 21931
Order Number Description City to Cremation 1
Amendment Status Keyed (Requires Affirmation) Microfilm Number
Page to Amend
Item In Error Item as it Appears Item as it Should be Edit Delete
New Burial Permit Required

Cancel Amendment Save Clear Return

Click Save

Select **City to Cremation 1** and enter a description.

Select **Page to Amend** from the drop down.

Amendment Page

Type City to Cremation 1 Amendment Date JUN-05-2013
Year 2013 Amendment Number 21977
Order Number Description City to Cremation 1
Amendment Status Keyed (Requires Affirmation) Microfilm Number
Page to Amend
Item In Error Death - Informant Death - Disposition Item as it Should be Edit Delete
New Burial Permit Required Yes

Cancel Amendment Save Clear Return

The page you want to amend will appear below for you to make the corrections.

You must complete the **Informant** and the **Disposition** page to become the owner of the case.

Informant Page

Enter the informant information and the individual authorizing the disposition information and then click on **Save**

Informant

Informant Name

First: Betty, Middle: , Last: Test, Suffix:

Relationship to Decedent: Mother, Other specify:

Address

Street Number: 85, Pre Directional: E, Street Name: Henry, Street Designator: Lane, Post Directional: , Apartment Number:

City or Town: New York, State: New York, Country: United States, Zip Code:

Individual Authorizing Disposition

Same As Informant:

First: Betty, Middle: , Last: Test, Suffix:

Relationship to Decedent: Mother, Other specify:

Buttons: Cancel Amendment, Validate Page, Validate Amendment, **Save**, Clear, Return

Click on the Page to Amend dropdown again and select Death-Disposition

Amendment Affirmation

Amendment Page

Type: City to Cremation 1, Amendment Date: JUN-05-2013

Year: 2013, Amendment Number: 21977

Order Number: , Description: City to Cremation 1

Amendment Status: Keyed (Requires Affirmation), Microfilm Number:

Page to Amend: Death - Disposition

Item In Error	Item as it Appears	Item as it Should be
Informant-Address		85
Informant-Address Street Name		Henry
Informant-Address Pre Directional		E

You **must** change the Funeral Director's name and the Funeral Home's name and address on the **Disposition** page to become the owner of the case.

Use the eraser  to remove the current information, and use the lookup  to enter the new information, and then click on **Save**

Disposition Page

Informant-Individual Authorizing Disposition Relationship NOT Available Mother
 Informant-Individual Authorizing Disposition Relationship Not Available Mother

New Burial Permit Required Yes

Disposition

Funeral Director

License Number Lookup 

First Middle Last Suffix

Funeral Home

Business Registration Number Lookup 

Street Number Pre Directional Street Name Street Designator Post Directional Apartment Number

City or Town State Country Zip Code

Click Save

You will see a summary for all the pages: **Item in Error**, **Item as it Appears**, and **Item as it Should be**.

Item in Error	Item as it Appears	Item as it Should be	Edit	Delete
Informant-Address Street Number		85	Edit	Delete
Informant-Address Street Name		Henry	Edit	Delete
Informant-Address Pre Directional		E	Edit	Delete
Informant-Address Street Designator		Lane	Edit	Delete
Informant-Address City		New York	Edit	Delete
Informant-Address State		New York	Edit	Delete
Informant-Address Country		United States	Edit	Delete
Informant-First Name		Betty	Edit	Delete
Informant-Last Name		Test	Edit	Delete
Informant-Individual Authorizing Disposition First Name		Betty	Edit	Delete
Informant-Individual Authorizing Disposition Last Name		Test	Edit	Delete
Informant-Individual Relationship	Not Available	Mother	Edit	Delete
Informant-Individual Authorizing Disposition Relationship	Not Available	Mother	Edit	Delete
Informant-Individual Authorizing Disposition Relationship	Not Available	Mother	Edit	Delete
Place Of Disposition - Funeral Director System Generated Id		1671078	Edit	Delete
Disposition-Funeral Director License Number		15255	Edit	Delete
Disposition-Funeral Director First Name	Robert	Anita	Edit	Delete
Disposition-Funeral Director Last Name	Kearney	Director	Edit	Delete
Place Of Disposition - Funeral Home System Generated Id	118	1041	Edit	Delete
Disposition-Funeral Home Name	Office of Chief Medical Examiner	Testing Funeral Home, Inc	Edit	Delete
Disposition-Funeral Home Business Registration Number		424242	Edit	Delete
Disposition-Funeral Home Street Number	520	125	Edit	Delete
Disposition-Funeral Home Street Name	First	Worth	Edit	Delete
Disposition-Funeral Home Apartment Number		204	Edit	Delete
Disposition-Funeral Home Street Designator	Avenue	Street	Edit	Delete

Click **Edit** if you wish to change the information entered.

Click **Delete** if you wish to remove the information entered.

Click **Amendment Affirmation** at the top left hand corner under Amendments Menu to sign the Amendment.

The City of New York Department of Health and Mental Hygiene

427785 :Little Mickey APR-17-2013 Amendment Exists
 /Personal Valid With Exceptions/Fact of Death Valid/Medical Valid With Exceptions/Registered/Signed/Pronounced/Certified/NA/ICD Coding Required/GIS Coding Required/Burial Permit Ready to Print

Amendments Menu
 Amendment
 Amendment Affirmation

Affirmations
 Affirm the following:

I certify that this change is being requested due to error or newly received information. (Note: Applications requiring documentary evidence cannot be submitted electronically.)

Have the Funeral Director place his/her finger on the biometric device to affirm the amendment

Place Finger

Affirm Clear Return

You will get a message once the amendment is **Approved**.

The City of New York Department of Health and Mental Hygiene

Messages

Send Message Remove from List

From	Message Text	Date Sent	
Lomi Zsrnwlm	The amendment for: Case Id: 526238 ; Campbell Benz, Date of Death: APR-30-2013 has been Approved.Approved by user.	4/30/2013 3:13:28 PM	<input type="checkbox"/>
Maya Feldman	The amendment for: Case Id: 526238 ; Campbell Benz, Date of Death: APR-30-2013 has been submitted for approval.	4/30/2013 3:12:27 PM	<input type="checkbox"/>
Judith Director Smith	The order for Te Te has been submitted by Judith Smith on Apr/30/2013,1 ITOP Disposition Permit	4/30/2013 2:01:30 PM	<input type="checkbox"/>
Judith Smith	The amendment for: Case Id: 743470 ; Te Te, Date of ITOP: APR-30-2013 has been Approved.Approved by user.	4/30/2013 1:53:17 PM	<input type="checkbox"/>

AFTER receiving approval for the **City to Cremation 1** Amendment

STEP 2: Submit Cremation Request to OCME via the Other Links menu

The City of New York Department of Health and Mental Hygiene

427785 :Little Mickey APR-17-2013 Amendment Exists
 /Personal Valid With Exceptions/Fact of Death Valid/Medical Valid With Exceptions/Registered/Signed/Pronounced/Certified/NA/ICD Coding Required/GIS Coding Required/Burial Permit Ready to Print

Death Registration Menu
 Personal Information
 Decedent
 Resident Address
 Family Members
 Informant
 Disposition
 Decedent Attributes
 Medical Certification
 Cause of Death
 Registrar
 Amendment List
 Other Links
 Amendments
 Comments
 Cremation Clearance
 Order Permit/Copies
 Print Forms
 Validate Registration

Cremation Clearance

Authorizing Individual Name
 First: Mark Last: Smith
 Relationship to Decedent: Brother Other Specify: _____

Authorizing Individual Address
 Street Number: 123 Pre Directional: [v] Street Name: Worth Street Designator: Stravenue Post Directional: [v] Apartment Number: _____
 City or Town: New York State: NY Country: United States Zip Code: 11232
 Phone Number: _____

Notify ME/Coroner
 Office Name: Office of Chief Medical Examiner
 First: _____ Middle: _____ Last: _____
 Cremation Clearance Status: Requested
 ME Case Number: _____
 Cremation Clearance Authorized By:
 First: _____ Middle: _____ Last: _____
 Cremation Reject Reason: _____

From the Cremation Clearance page, click on **Save** to request cremation approval

Clear Save Return

You will get a message once the cremation clearance is **Approved**.

From	Message Text	Date Sent	
Corinne Ambrosi	Cremation Clearance has been approved for Case: 427785, Name: Little Mickey, Date of Death: APR-17-2013. Mickey, Little	5/3/2013 11:07:10 AM	<input type="checkbox"/>
Lomi Zsrwlm	The amendment for: Case Id: 427785 ; Little Mickey, Date of Death: APR-17-2013 has been Approved.Approved by user.	5/3/2013 11:01:06 AM	<input type="checkbox"/>
Maya Feldman	The amendment for: Case Id: 427785 ; Little Mickey, Date of Death: APR-17-2013 has been submitted for approval.	5/3/2013 10:59:42 AM	<input type="checkbox"/>
Lomi Zsrwlm	The amendment for: Case Id: 526238 ; Campbell Benz, Date of Death: APR-30-2013 has been Approved.Approved by user.	4/30/2013 3:13:28 PM	<input type="checkbox"/>
Mava Feldman	The amendment for: Case Id: 526238 ; Campbell Benz, Date of Death: APR-30-2013 has been submitted for approval.	4/30/2013 3:12:27 PM	<input type="checkbox"/>

AFTER receiving approval for the Cremation Clearance from OCME

STEP 3: Submit City to Cremation 2 Amendment type to Change Method of Disposition to Cremation

Select **Amendments** in Other Links menu

Amendments Menu

743536 :Jeremy Test JUN-05-2013 Amendment Exists
/Personal Valid With Exceptions/Fact of Death Valid/Medical Valid/Registered/Signed/Pronounced/Certified/NA/GIS Coding Required/ICD Coding Required

Amendment Page

Type: Amendment Number:

Year: Amendment Date:

Order Number: Description:

Amendment Status: Microfilm Number:

New Burial Permit Required:

Click Save

Save Clear Return

Select the pages to be amended from the **Page to Amend** dropdown

Amendments Menu

743536 :Jeremy Test JUN-05-2013 Amendment Exists
/Personal Valid With Exceptions/Fact of Death Valid/Medical Valid/Registered/Signed/Pronounced/Certified/NA/GIS Coding Required/ICD Coding Required

Amendment Page

Type: Amendment Date:

Year: Amendment Number:

Order Number: Description:

Amendment Status: Microfilm Number:

Page to Amend:

Item In Error: Item as it Should be: Edit: Delete:

New Burial Permit:

Cancel Amendment Save Clear Return

Please Note: You must submit changes to all the respective pages within this amendment. If you do not, you will have to submit a personal amendment later for which you will have to pay a \$40 correction fee.

Disposition Page:

Amendments Menu
Amendment
Amendment Affirmation

Death Registration Menu
Personal Information
Decedent
Resident Address
Family Members
Informant
Disposition
Decedent Attributes
Medical Certification
Cause of Death
Registrar
Amendment List
Other Links
Amendments
Comments
Cremation Clearance
Order Permit/Copies
Print Forms
Validate Registration

743536 :Jeremy Test JUN-05-2013 Amendment Exists
/Personal Valid With Exceptions/Fact of Death Valid/Medical Valid/Registered/Signed/Pronounced/Certified/NA/GIS Coding Required/ICD Coding Required

Amendment Page

Type: City to Cremation 2
Amendment Date: JUN-06-2013
Year: 2013
Amendment Number: 21978
Order Number:
Description:
Amendment Status: Keyed (Requires Affirmation)
Microfilm Number:
Page to Amend: Death - Disposition
Item In Error:
Item as it Appears:
Item as it Should be:
New Burial Permit Required:

Disposition

Method of disposition: City Burial (Potter's Field) Other Specify:
Date of disposition:
Place of disposition:
Place of Disposition: City Cemetery At Hart Island
City or Town: Bronx State: New York Country: United States

Buttons: Cancel Amendment, Validate Page, Validate Amendment, Save, Clear, Return

Change **Disposition** to cremation.

Enter the **Date of disposition**

Enter the **Place of disposition** (use pencil icon to erase and the lookup to search)

Click **Save**

You will see a summary for all the pages: **Item in Error**, **Item as it Appears**, and **Item as it Should be**.

Testing Funeral Home, Inc. Welcome back: pgentlesFD Logout

Main Order Processing Life Events Queues Reports Forms Table Maintenance Help

The City of New York Department of Health and Mental Hygiene

Amendments Menu
Amendment
Amendment Affirmation

Death Registration Menu
Personal Information
Decedent
Resident Address
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Informant
Disposition
Decedent Attributes
Medical Certification
Cause of Death
Registrar
Amendment List
Other Links
Amendments
Comments
Cremation Clearance
Order Permit/Copies
Print Forms
Validate Registration

743536 :Jeremy Test JUN-05-2013 Amendment Exists
/Personal Valid With Exceptions/Fact of Death Valid/Medical Valid/Registered/Signed/Pronounced/Certified/NA/GIS Coding Required/ICD Coding Required

Amendment Page

Type: City to Cremation 2
Amendment Date: JUN-06-2013
Year: 2013
Amendment Number: 21978
Order Number:
Description: amending City burial to Cremation
Amendment Status: Keyed (Requires Affirmation)
Microfilm Number:
Page to Amend:
Item In Error:
Item as it Appears:
Item as it Should be:
New Burial Permit Required: Yes

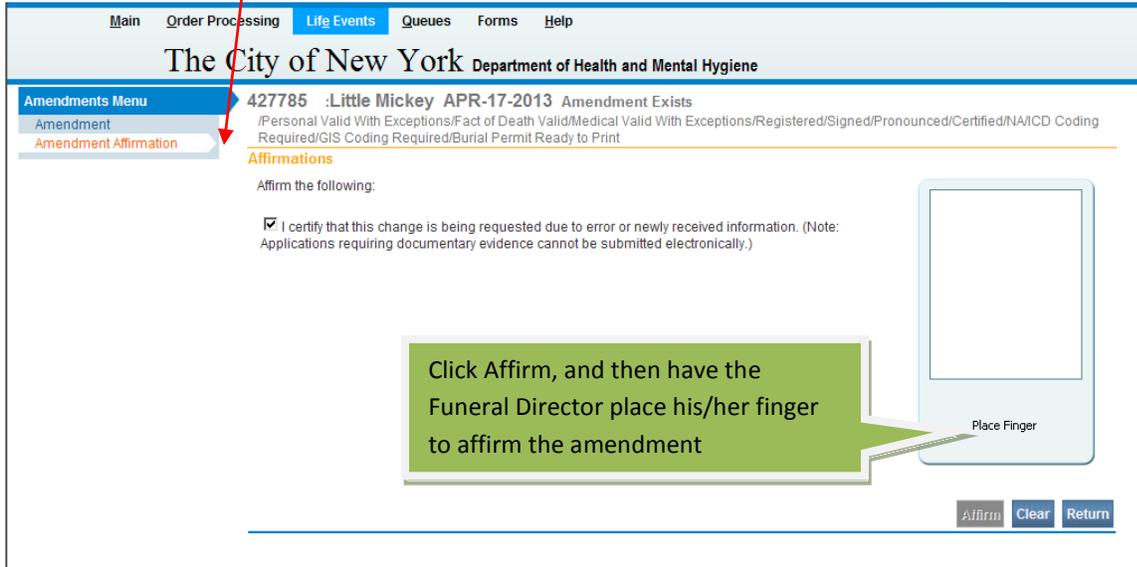
Item In Error	Item as it Appears	Item as it Should be	Edit	Delete
Disposition-Method of Disposition	City Burial (Potter's Field)	Cremation	Edit	Delete
Place Of Disposition - Place of Disposition System Generated Id	75		Edit	Delete
Disposition-Place Name	City Cemetery At Hart Island	Greenwood Crematory	Edit	Delete
Disposition-Place City	Bronx	Brooklyn	Edit	Delete

Buttons: Cancel Amendment, Save, Clear, Return

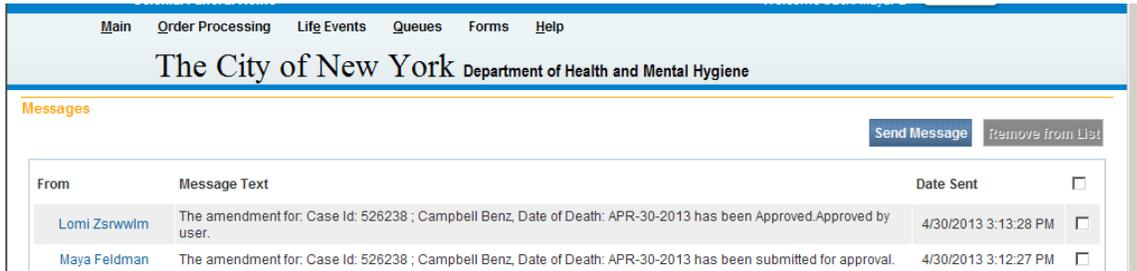
Select the Page to Amend dropdown again to submit changes to all the respective pages.

After making the changes to all respective pages

Click **Amendment Affirmation** to sign the amendment



You will get a message once the amendment is **Approved**.

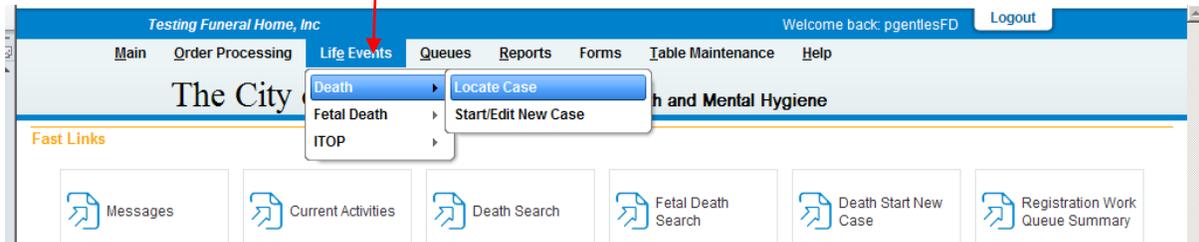


AFTER receiving approval for the **City to Cremation 2** Amendment, you will now need to submit payment for a disposition permit to print it. Refer to *How do I order death certificate-related services in EVERS for instructions*.

TYPE 3: CHANGING DISPOSITION TO CITY BURIAL

STEP 1: Submit Personal Amendment to Change Disposition

Locate the case by selecting **Life Events, Death, Locate Case**.



Submit the \$40 Corrections Fee **first** before starting the amendment. Refer to *How do I order certificate-related services in EVERS for instructions*.

Select **Amendments** in **Other Links** menu

Colonial Funeral Home Welcome back: MayaFD Logout

Main Order Processing Life Events Queues Forms Help

The City of New York Department of Health and Mental Hygiene

Amendments Menu 427785 :Little Mickey APR-17-2013 Amendment Exists
/Personal Valid With Exceptions/Fact of Death Valid/Medical Valid With Exceptions/Registered/Signed/Pronounced/Certified/NA/ICD Coding Required/GIS Coding Required/Burial Permit Ready to Print

Amendment Page

Type **Personal** Amendment Date

Year 2013 Amendment Number 21933

Order Number Description

Amendment Status Keyed (Requires Affirmation) Microfilm Number

Page to Amend **Death - Disposition**

Item In Error Item as it Appears Item as it Should be

New Burial Permit Required

Disposition

Method of disposition **Burial (Not Potter's Field)** Other Specify

Date of disposition **MAY-15-2013**

Place of disposition

Place of Disposition

City or Town State Country

Funeral Director

License Number Lookup

Done Local intranet 100%

You **must** change the following items:

- Method of Disposition:** It should be Other Specify, City Burial (Potter's Field)
- Date of Disposition:** It should be the date that the body will be transported to OCME.
- Place of Disposition:** It should be City Cemetery at Hart Island, Bronx, New York, United States.

Do NOT remove your Funeral Home name and Funeral Director name.

You will see a summary for all the pages: **Item in Error**, **Item as it Appears**, and **Item as it Should be**.

Main Order Processing Life Events Queues Forms Help

The City of New York Department of Health and Mental Hygiene

Amendments Menu 427785 :Little Mickey APR-17-2013 Amendment Exists
/Personal Valid With Exceptions/Fact of Death Valid/Medical Valid With Exceptions/Registered/Signed/Pronounced/Certified/NA/ICD Coding Required/GIS Coding Required/Burial Permit Ready to Print

Amendment Page

Type **Personal** Amendment Date

Year 2013 Amendment Number 21933

Order Number Description

Amendment Status Keyed (Requires Affirmation) Microfilm Number

Page to Amend

Item In Error	Item as it Appears	Item as it Should be	Edit	Delete
Disposition-Method of Disposition	Burial (Not Potter's Field)	Other, specify	Edit	Delete
Disposition-Disposition Method Other Specify		City Burial	Edit	Delete
Disposition-Place Name	Acacia Cemetery	City Cemetery at Hart Island	Edit	Delete
Disposition-Place City	New York	Bronx	Edit	Delete

New Burial Permit Required

Cancel Amendment Save Clear Return

Click **Amendment Affirmation** to sign the amendment

Amendments Menu
Amendment
Amendment Affirmation

427785 :Little Mickey APR-17-2013 Amendment Exists
/Personal Valid With Exceptions/Fact of Death Valid/Medical Valid With Exceptions/Registered/Signed/Pronounced/Certified/NA/ICD Coding Required/GIS Coding Required/Burial Permit Ready to Print

Affirmations
Affirm the following:
 I certify that this change is being requested due to error or newly received information. (Note: Applications requiring documentary evidence cannot be submitted electronically.)

Place Finger

Affirm Clear Return

Click on **Affirm**.
Have the Funeral Director place his/her finger on the biometric device to affirm the amendment

You will get a message once the amendment is **Approved**.

Testing Funeral Home, Inc. Welcome back: pgentlesFD Logout

Main Order Processing Life Events Queues Reports Forms **Table Maintenance** Help

The City of New York Department of Health and Mental Hygiene

Messages Send Message Remove from List

From	Message Text	Date Sent	
Maya Feldman	The order for Lanali Paduilla has been submitted by Maya Feldman on May/01/2013. Death CC Funeral Home 1 Disposition Permit	5/1/2013 11:30:16 AM	<input type="checkbox"/>
Judith Smith	The amendment for: Case Id: 743391 ; Te Te, Date of ITOP: APR-10-2013 has been Approved.Approved by user.	4/16/2013 11:46:49 AM	<input type="checkbox"/>
Judith Smith	The amendment for: Case Id: 743391 ; Te Te, Date of ITOP: APR-10-2013 has been Rejected.Rejected..	4/16/2013 11:32:31 AM	<input type="checkbox"/>
Judith Smith	The amendment for: Case Id: 743391 ; Te Te, Date of ITOP: APR-10-2013 has been Rejected.Rejected..	4/16/2013 11:25:10 AM	<input type="checkbox"/>
Flor Betancourt	The order for Pablo Amarillo has been submitted by Flor Betancourt on Apr/11/2013.1 Death CC Funeral Home	4/11/2013 3:47:56 PM	<input type="checkbox"/>
Flor Betancourt	The order for Pablo Amarillo has been submitted by Flor Betancourt on Apr/11/2013.1 Disposition Permit	4/11/2013 3:47:56 PM	<input type="checkbox"/>

For questions regarding EVERS, please contact:

Constituent Services Unit
New York City Department of Health and Mental Hygiene
(646) 632-6705
evers@health.nyc.gov

Have you seen our website yet? Go ahead, take a look now! <http://www.nyc.gov/evers>