**Dead Identification Form**

1. **Recovery Details**

A.1 Location: (Where the body was found) (Autocomplete if possible) (Search for address and then display longitude and latitude)

A.2 Date (Calendar)

A.3 Time (Clock)

A.4 Whom found?

(Bullet Type)

* Volunteer
* Agency

(If agency, what agency?) (Dropdown) (OCD, DSWD, DILG, DOH, MMDA, NBI, PRC, PNP, BFP, AFP, DPWH, DFA, PCG, MGB, IFRC, ICRC, DILG, and Private / Volunteer Groups)

A.5 First Name Middle Name Surname