Indiana State Police Methamphetamine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date: 1/28/10

Case #: 52-47698

County: Marion

Address: 511 E Troy Ave
Indianapolis, IN
_____

Type of Laboratory Seizure (check one)

- ☒ Operational Lab
- ☐ Chemical/Glassware/Equipment (only)
- ☐ Dumpsite (only)

Seizure Location (check all that apply)

- ☒ Residence
- ☐ Outbuilding
- ☐ Vehicle
- ☐ Hotel/Motel
- ☐ Open – No Structure
- ☐ Other: _____

Items Found: Location (bedroom, kitchen, open air, etc)
(check all that apply)

- ☐ Lithium/Ammonia Reaction(s): _____
- ☐ Red Phosphorous/Iodine Reaction(s): _____
- ☒ Flammable Solvents: bedroom
- ☒ Water Reactive Metal (Lithium): bedroom/trash
- ☒ Anhydrous Ammonia: bedroom
- ☐ Hydrochloric Acid Gas Generator(s): _____
- ☒ Corrosive Acid: bedroom/trash
- ☐ Corrosive Base: _____
- ☐ Other (item and location):_____

Child under age 18 discovered (check one)

- ☐ Yes _____ (number present)
- ☒ No

*If yes, fax report to Child Protective Services

Investigative Information

- ☐ Ephedrine/Pseudoephedrine Tracking Log
- ☐ Retail/Merchant Tip
- ☒ Other:Owner

This report is to be faxed to the following agencies that serve the location:

Fire Department: IFD — Fax: 317-327-6091

Health Department: Marion County Health — Fax: 317-327-6035

Child Protection Service: _____ — Fax: _____

For further information regarding this methamphetamine laboratory, contact
Investigating Officer: T. Egler Phone 317-234-4591

** This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

*** This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.