

# Law Enforcement Methamphetamine Laboratory Occurrence Report

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

Date: 03/21/2011

Address:

Case #: 11F041011 47220

5300 Deforest Ave.  
Fort Wayne, IN 46809

County: Allen

## Type of Laboratory Seizure (check one)

- Operational Lab (active and/or spent)  
 Chemical/Glassware/Equipment (only)  
 Dumpsite (only)

## Seizure Location (check all that apply)

- Residence  Hotel/Motel  
 Outbuilding  Open - No Structure  
 Vehicle  Other:

## Items Found: Location (bedroom, kitchen, open air, etc.)

(check all that apply)

- Lithium/Ammonia Reaction(s): Side of road  
 Red Phosphorous/Iodine Reaction(s):  
 Flammable Solvents:  
 Water Reactive Metal (Lithium):  
 Anhydrous Ammonia:  
 Hydrochloric Acid Gas Generator(s): Side of road  
 Corrosive Acid:  
 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: Officer initiated

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

Fire Department: Fort Wayne Fire Dept

Fax: (260) 427-1277

Health Department: Allen County

Fax: (260) 427-1391

Child Protective Services:

Fax: (317) 234-7596

Code Enforcement:

Fax: (260) 427-1409

For further information regarding this methamphetamine laboratory/location, contact

Investigating Officer: Robert Kirby FW 1419

Phone: (260) 427-1203

Email: robert.kirby@ci.ft-wayne.in.us

\*\* This form is to be faxed/mailed 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.