

Indiana State Police Methamphetamine Laboratory Occurrence Report

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

Date: 11/12/12
Incident #: 12-10889
County: Warrick

Address: 223 N 4th St
Boonville, IN 47601

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): Basement
- Red Phosphorous/Iodine Reaction(s): _____
- Flammable Solvents: Basement, Kitchen
- Water Reactive Metal (Lithium): Basement
- Hydrochloric Acid Gas Generator(s): Basement, Hallway
- Anhydrous Ammonia: _____
- Corrosive Acid: Basement
- Corrosive Base: _____
- Other (item and location): _____

Child under age 18 discovered (check appropriate)

- Yes _____ (number present)
 - No
 - Children not present but evidence they reside or visit often
- Living conditions of home: clean disarray unclean
 Estimated length of time manufacturing had been occurring: _____
 Additional Information: _____

This report has been faxed* to the following agencies that serve the location:

Fire Department: Boonville Fax: _____
 Health Department: _____ Fax: _____
 Department of Child Services: Warrick Fax: _____

For further information regarding this methamphetamine laboratory, contact Investigating Officer: _____ Phone _____

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

5-14-2012 ~~DEP~~ Ass. Chief McKain 897-6550