## **Indiana State Police Methamphetamine Laboratory Occurrence Report**

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

Date:	<u>11/16/12</u>	Address:	596 Chestnut St Lot 75
Case #:	007756		Shelbyville, IN
County:	<u>Shelby</u>		
<u>Type of Laboratory Seizure</u> (check one) <u>Seizure Location</u> (check all that apply)			heck all that apply)
Operation	al/Glassware/Equipment (only)	Residence Outbuilding Vehicle	<ul> <li>Hotel/Motel</li> <li>Open – No Structure</li> <li>Other:</li> </ul>
Items Found: Location (bedroom, kitchen, open air, etc)         (check all that apply)         Itithium/Ammonia Reaction(s): Outside Trash			
Red Phosphorous/Iodine Reaction(s):			
Flammable Solvents:			
Water Reactive Metal (Lithium): <u>Outside Trash</u>			
Anhydrous Ammonia:			
Hydrochloric Acid Gas Generator(s):			
Corrosive Acid: <u>Bedroom Bathroom</u>			
Corrosive Base: <u>Kitchen</u>			
Other (item and location):			
$\bigvee$ Yes <u>1</u> ( $\square$ No	er age 18 discovered (check one) (number present) port to Child Protective Services	Ephedrin	<u>e <b>Information</b></u> e/Pseudoephedrine Tracking Log erchant Tip <u>D</u>
This report is to be faxed to the following agencies that serve the location:			
Fire Depart	ment: <u>Shelbyville</u>	Fax:	
Health Department: <u>Shelby Co</u>		Fax: Fax:	
Child Prote	ction Service: <u>Shelby Co</u>		-
For further information regarding this methamphetamine laboratory, contact Investigating Officer: Trp. Aaron Pfaff Phone 317-899-6577			

\*\* 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.