

Indiana State Police Methamphetamine Laboratory Occurrence Report

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

Date: 03/13/12

Address: 12923 Morse LN

Case #: 13F77423

Cedar Lake, IN

County: Lake

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:
Travel Trailer

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

(check all that apply)

- Lithium/Ammonia Reaction(s): _____
 Red Phosphorous/Iodine Reaction(s): _____
 Flammable Solvents: Trailer
 Water Reactive Metal (Lithium): _____
 Hydrochloric Acid Gas Generator(s): Trailer, Trash Cans
 Anhydrous Ammonia: _____
 Corrosive Acid: Trailer
 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: unknown
Additional Information: Lake Co. Police investiga

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

Fire Department: Cedar Lake VFD
Health Department: Lake Co.
Department of Child Services: _____

Fax: (219) 374-5999
Fax: (219) 755-3668
Fax: _____

For further information regarding this methamphetamine laboratory, contact
Investigating Officer: J.R. Wilson Phone 574 546 4900

* 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.