

Indiana State Police Methamphetamine Laboratory Occurrence Report

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

Date: 1/30/2013

Address: 1313 N. Carroll St

Case #: 13ISPL001032

Marion, IN

County: Grant

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): Bed room
 Red Phosphorous/Iodine Reaction(s): _____
 Flammable Solvents: Bed room and dining room
 Water Reactive Metal (Lithium): _____
 Hydrochloric Acid Gas Generator(s): Bed room
 Anhydrous Ammonia: _____
 Corrosive Acid: Bed room and dining room
 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: 1 month
Additional Information: Involved in house fire

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

Fire Department: Yes Fax: 765-668-1788
Health Department: Yes Fax: 765-651-2401
Department of Child Services: _____ Fax: _____

For further information regarding this methamphetamine laboratory, contact
Investigating Officer: Tpr. Ron Fisher Phone 800-382-0689

* 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.