Indiana State Police Methamphetamine Laboratory Occurrence Report

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

Date: 02/07/2013

Incident #: 13ISPC001354

County: JENNINGS

Address: C.R. 1150 S. @ C.R. 975 W.

Type of Laboratory Seizure (check one)

- [x] Operational Lab
- [ ] Chemical/Glassware/Equipment (only)
- [ ] Dumpsite (only)

Seizure Location (check all that apply)

- [ ] Residence
- [ ] Outbuilding
- [ ] Vehicle
- [ ] Hotel/Motel
- [x] Open – No Structure
- [ ] Other:

Items Found: Location (bedroom, kitchen, open air, etc)
(check all that apply)

- [ ] Lithium/Ammonia Reaction(s): _____
- [ ] Red Phosphorous/Iodine Reaction(s): _____
- [x] Flammable Solvents: ALONG ROADWAY
- [ ] Water Reactive Metal (Lithium): _____
- [x] Hydrochloric Acid Gas Generator(s): ALONG ROADWAY
- [ ] Anhydrous Ammonia: _____
- [ ] Corrosive Acid: _____
- [ ] Corrosive Base: _____
- [ ] Other (item and location):_____

Child under age 18 discovered (check appropriate)

- [ ] Yes _____ (number present)
- [x] 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: MONTGOMERY TWNSHP. Fax: 812-346-1913
Health Department: JENNINGS CO. Fax: 82-352-3030
Department of Child Services: N/A Fax: N/A

For further information regarding this methamphetamine laboratory, contact
Investigating Officer: TROOPER MARTIN A. MEAD Phone 812-689-5000

* 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.