

Indiana State Police Clandestine Laboratory Occurrence Report

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

Date: 5/1/2013
Incident #: 13ISPC004323
County: Cass

Address: 830 18th st
Logansport, IN
46947

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)

- One Pot or Birch Reaction(s): _____
- Red Phosphorous/Iodine Reaction(s): _____
- Hydrochloric Acid Gas Generator(s): _____
- Flammable Solvents: Garage
- Water Reactive Metal (Lithium): _____
- Anhydrous Ammonia: _____
- Corrosive Acid: gargae
- Corrosive Base: garage
- Other (item and location): _____

Vehicle Information:

Owner:
VIN:
Year:

Make:
Model:

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* or emailed to the following agencies that serve the location:

Fire Department City, Township or County Logansport FD Fax: 574-722-3842
 Health Department County: Cass Co. Health Dept Fax: 574-753-7039
 Department of Child Services Hotline: deshotlinereports@dcs.in.gov Fax: 317-234-7595 or 317-234-7596

For further information regarding this methamphetamine laboratory, contact Investigating Officer: Mike Lorona Phone 765-473-6666

*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.