

Indiana State Police Methamphetamine Laboratory Occurrence Report

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

Date: 3/20/2013

Address: 575 N At 500 W

Incident #:

Crawfordsville, IN

County: Montgomery - 54

47933

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): _____
 Red Phosphorous/Iodine Reaction(s): _____
 Flammable Solvents: Cooler in Ditch
 Water Reactive Metal (Lithium): _____
 Hydrochloric Acid Gas Generator(s): Cooler in Ditch
 Anhydrous Ammonia: _____
 Corrosive Acid: _____
 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: In ditch; no suspect(s)

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

Fire Department: Waynetown VFD Fax: 765-364-5159
Health Department: Montgomery County Fax: 765-361-3239
Department of Child Services: NA Fax: NA

For further information regarding this methamphetamine laboratory, contact
Investigating Officer: B. Russell Phone 765-567-2125

* 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.