

Indiana State Police Clandestine Laboratory Occurrence Report

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

Date: 08-26-2013

Address: 1568 CR 36

Incident #: 13ISPC008415

GARRETT, IN

County: DEKALB

46730

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): UTILITY/BATHROOM

Red Phosphorous/Iodine Reaction(s): _____

Hydrochloric Acid Gas Generator(s): UTILITY/BATHROOM

Flammable Solvents: _____

Water Reactive Metal (Lithium): _____

Anhydrous Ammonia: _____

Corrosive Acid: UTILITY/BATHROOM

Corrosive Base: UTILITY/BATHROOM

Other (item and location): NITRATE/UTILITY/BATHROOM

Vehicle Information:

Owner:

Make:

VIN:

Model:

Year:

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 GARRETT FD Fax: E-MAILED

Health Department County: DEKALB CO Fax: E-MAILED

Department of Child Services Hotline: dcshotlinereports@dcs.in.gov Fax: 317-234-7595 or 317-234-7596

For further information regarding this methamphetamine laboratory, contact

Investigating Officer: ANDREW SMITH Phone 260-432-8661

*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.