

Indiana State Police Clandestine Laboratory Occurrence Report

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

Date: 06/23/2013

Address: 2067 E. CR 950 N

Incident #: 13ISPC006194

FARMERSBURG, IN

County: SULLIVAN

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): OUTBUILDING
 Red Phosphorous/Iodine Reaction(s): _____
 Hydrochloric Acid Gas Generator(s): OUTBUILDING
 Flammable Solvents: OUTBUILDING
 Water Reactive Metal (Lithium): OUTBUILDING
 Anhydrous Ammonia: OUTBUILDING
 Corrosive Acid: OUTBUILDING
 Corrosive Base: _____
 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: YEAR
Additional Information: N/A

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

Fire Department City, Township or County THUNDERBIRD Fax: 812-696-2151
Health Department County: SULLIVAN Fax: 812-268-0224
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: M. WOOD Phone 765-653-4114

*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.