

# Indiana State Police Clandestine Laboratory Occurrence Report

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

Date: 03/04/2014 Address: 3580 ALONSO SMITH RD.  
Incident #: 14ISPC001780 GEORGETOWN, IN  
County: FLOYD 47122

## Type of Laboratory Seizure (check one)

- Operational Lab  
 Chemical/Glassware/Equipment (only)  
 Dumpsite (only)

## Seizure Location (check all that apply)

- Residence  Hotel/Motel  
 Outbuilding  Open - No Structure  
 Vehicle  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: GARAGE  
 Corrosive Base: GARAGE  
 Other (item and location): AMMONIA NITRATE GARAGE

## Vehicle Information:

Owner: \_\_\_\_\_ Make: \_\_\_\_\_  
VIN: \_\_\_\_\_ Model: \_\_\_\_\_  
Year: \_\_\_\_\_

## Child under age 18 discovered (check appropriate)

- Yes 3 (number present) Living conditions of home:  clean  disarray  
 No  unclean  
 Children not present but evidence they reside Estimated length of time manufacturing had been  
or visit often occurring: \_\_\_\_\_  
Additional Information: \_\_\_\_\_

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

Fire Department City, Township or County Georgetown VFD Fax: Mailed  
Health Department County: Floyd Co Fax: Emailed  
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: KATRINA SMITH Phone 812-246-5424

\*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.