

# Indiana State Police Clandestine Laboratory Occurrence Report

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

Date: 05/13/14

Street: 1340 N MANCHESTER AVE

Incident #: 14ISPC003969

Apt, Lot, Room #:

County: WABASH

City: WABASH

## Type of Laboratory Seizure (check one)

- Lab Seizure  
 Chemical Seizure  
 Equipment Seizure  
 Dumpsite Seizure

## Seizure Location (check all that apply)

- Residence  Hotel/Motel  
 Outbuilding  Open - No Structure  
 Vehicle  Business  
 Other: \_\_\_\_\_

Apt., hotel, multi-family dwelling: Shared HVAC:  Yes  No  Unknown

## 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): \_\_\_\_\_  
PARKING LOT  
 Flammable Solvents: \_\_\_\_\_  
 Water Reactive Metal (Lithium): \_\_\_\_\_
- Anhydrous Ammonia: \_\_\_\_\_  
 Corrosive Acid: \_\_\_\_\_  
 Corrosive Base: \_\_\_\_\_  
 Ammonium Nitrate/Sulfate: \_\_\_\_\_  
 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: N/A  
Additional Information: \_\_\_\_\_

## Vehicle, Travel Trailer, RV or Watercraft Information:

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

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

Fire Department: WABASH FIRE Fax: EMAILED  
Health Department County: WABASH CO Fax: EMAILED  
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: WENDELL BEACHY Phone 7654736666

\*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.