## <u>Indiana State Police Methamphetamine Laboratory Occurrence Report</u> This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>12/26/2011</u>	Address:	104 E Pearl Street
Case #:	<u>52F-51286</u>		Trafalgar, IN
County:	<u>Johnson</u>		
Type of La	aboratory Seizure (check one)	Seizure Location (	check all that apply)
⊠ Operati □ Chemic □ Dumps	cal/Glassware/Equipment (only)	Residence Outbuilding Vehicle	☐ Hotel/Motel ☐ Open – No Structure ☐ Other:
(check all th	nd: Location (bedroom, kitchen, open a hat apply) n/Ammonia Reaction(s): Southeast re		
Red Ph	osphorous/Iodine Reaction(s):		
⊠ Flamma	able Solvents: Northeast room upstain	<u>rs</u>	
⊠ Water F	Reactive Metal (Lithium): Southeast	room upstairs	
⊠ Hydroc	hloric Acid Gas Generator(s): South	east room upstairs	
Anhydr	ous Ammonia:		
Corrosi	ve Acid: Southeast room upstairs		
	ve Base: Northeast room upstairs		
_	item and location):		
	, <u> </u>		
☐ Yes _ ☐ No ☑ Childre Living cond Estimated l	er age 18 discovered (check appropriation (number present)  n not present but evidence they reside ditions of home:  clean disarration; disarration of time manufacturing had been disarration;	or visit often y  unclean	
This repor	t has been faxed* to the following a	gencies that serve th	e location:
Health Dep	tment: Trafalgar Fire partment: Johnson County t of Child Services:	Fax: Fax: Fax:	_
	information regarding this methamph ng Officer: <u>Tom Egler</u> Pho	etamine laboratory, c ne <u>317-234-4591</u>	ontact
	rm is to be faxed to the Fire Department, Hea	Ith Department and/or De	partment of Child Services

3/7/11 12/29/2011 Verified vacant by Bob South -