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

Date:	<u>3/5/2010</u>	Address:	Land O Nod
Case #:	<u>52-47886</u>		1900 S US 31, Rm 6
County:	<u>Johnson</u>		Franklin, IN
Type of Laboratory Seizure (check one) Seizure Location (check all that apply)			
Operati Chemic Dumpsi	al/Glassware/Equipment (only)	Residence Outbuilding Vehicle	☐ Hotel/Motel☐ Open – No Structure☐ Other:Trash dumpster
Items Found: Location (bedroom, kitchen, open air, etc)			
(check all that apply) Lithium/Ammonia Reaction(s): <u>Dumpster</u>			
Red Phosphorous/Iodine Reaction(s):			
☐ Flammable Solvents: <u>Dumpster</u>			
Water Reactive Metal (Lithium):			
Anhydrous Ammonia:			
Hydrochloric Acid Gas Generator(s):			
Corrosive Acid: Room 6			
Corrosive Base: <u>Dumpster</u>			
Other (item and location): Ammonia Nitrate- Dumpster			
☐ Yes _ ⊠ No	er age 18 discovered (check one) (number present) port to Child Protective Services	Ephedrine	: Information :/Pseudoephedrine Tracking Log :rchant Tip
This report is to be faxed to the following agencies that serve the location:			
Fire Depart	ment: <u>Franklin FD</u>	Fax: 317-73	<u>36-3650</u>
Health Dep	artment: Johnson Co. Health	Fax: (317)	736-5264
Child Prote	ction Service:	Fax:	
For further information regarding this methamphetamine laboratory, contact Investigating Officer: Tom Egler Phone 317-234-4591			
** This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing. *** This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.			