

Bomb Threat Report Form

Property Name:

Address:

City, State, Zip Code:

Exact Wording of the Threat: _____

Information to Record:

Caller's		
	Normal	Stutter
	Angry	Lisp
	Excited	Whisper
	Laughter	Crying
	Familiar	Slurred

Dial *69 record number: _____

Gender of Caller: _____

Accent/Type: _____

Age: _____ Length of call: _____

Number call received at: _____

Exact date and time of call: _____

Background Sound		
	Street Noises	Animal Noises
	Voices	Static
	PA System	Local
	Music	Long Distance
	Motor Noises	Cellular
	Children	
	Other	

Questions to ask:

1. When is the bomb going to explode? _____
2. Where is the bomb right now? _____
3. What does it look like? _____
4. What kind of bomb is it? _____
5. What will cause the bomb to explode? _____
6. Did you place the bomb? _____

Threat Language:		
	Educated	Incoherent

	Foul		Taped
	Irrational		Message Read

7. Why? _____
8. Where are you calling from? _____
9. What is your name? _____
10. What is your address? _____