BOMB THREAT CHECKLIST

☐ Bomb Threat Caller  ☐ Third-Party Caller  Day: _______ Date: ___________ Time: _______ ☐ AM  ☐ PM

Name of caller ___________________________ Address ___________________________ ☐ Male  ☐ Female

Phone Number of Bomb Threat or Third-Party Caller: ___________________________ ☐ Long Distance  ☐ Local

Time Caller Hung Up: ___________ ☐ AM  ☐ PM

Ask Caller (if relevant)

• Where is the bomb located? (Building, Floor, Room, Vehicle, Seat, Trunk, etc.) ___________________________
• When will it go off? (Date, Time) ___________________________
• What does it look like? (Size, Shape, etc.) ___________________________
• What kind of bomb is it? (Letter, Package, Email) ___________________________
• What will make it explode? (Remote, Touch) ___________________________
• Did you place the bomb? ☐ Yes  ☐ No  Why? ___________________________

Exact Words of Threat

______________________________________________________________________________________________

Information About Caller

• Where does it seem the bomb threat caller is located? (Background sounds, level of noise) ___________________________
• Is the voice familiar? ☐ Yes  ☐ No  If so, who does it sound like? ___________________________

Bomb Threat Caller’s Voice:  Background Sounds:  Threat Language:

☐ Accent  ☐ Loud  ☐ Animal Noises  ☐ Incoherent
☐ Angry  ☐ Nasal  ☐ House Noises  ☐ Message Read
☐ Heavy  ☐ Normal  ☐ Kitchen Noises  ☐ Taped Message
☐ Calm  ☐ Ragged  ☐ Booth  ☐ Irrational
☐ Clearing Throat  ☐ Rapid  ☐ PA System  ☐ Profane
☐ Coughing  ☐ Raspy  ☐ Conversation  ☐ Well-spoken
☐ Cracking Voice  ☐ Slow  ☐ Music  ☐ Other _________
☐ Crying  ☐ Slurred  ☐ Motor Running  ☐ Other _________
☐ Deep  ☐ Soft  ☐ Static  ☐ Office Machinery
☐ Disgusted  ☐ Stutter  ☐ Factory Machinery  ☐ Other _________
☐ Excited  ☐ Age _________  ☐ Other _________  ☐ Other _________
☐ Laughing  ☐ Other _________  ☐ Other _________  ☐ Other _________

Additional Information (Use the back of the form if necessary)

______________________________________________________________________________________________