

Bomb Threat Checklist

Date of call: _____

Time of call: _____

Caller's voice (circle all that apply):

Accent	Deep Breathing	Laughing	Rapid
Angry	Deep Voice	Lisp	Raspy
Calm	Disguised	Loud	Slow
Clearing Throat	Distinct	Nasal	Slurred
Cracking Voice	Excited	Normal	Soft
Crying	Familiar	Ragged	Stutter

Questions to Ask:

1. When is the bomb going to explode?
2. Where is it right now?
3. What does it look like?
4. What kind of bomb is it?
5. What will cause it to explode?
6. Did you place the bomb?
7. Why?
8. What is your address?
9. What is your name?
10. If the voice is familiar, who did it sound like?

Exact wording of the threat:

Threat language (circle all that apply):

Well - spoken	Foul	Incoherent
Educated	Irrational	Taped
Message read by threat maker		

Background sounds (circle all that apply):

Well - spoken	Foul	Incoherent	Static
Educated	Irrational	Taped	Street noises
Message read by threat maker	No background noise		Voices

Other:

Phone number (from caller ID, if available): _____ Length of call: _____

Sex of caller (circle): Male Female Age of Caller _____

Race/nationality of caller: _____

Be available on site to give responding officers this completed form.

Person Completing the Form: _____ Job Title _____

Department Name: _____ Phone Number: _____

After caller disconnects DO NOT HANG UP THE PHONE – Immediately dial 911 from another phone.