

Bomb Threat Checklist

DATE:	TIME:
--------------	--------------

<input type="checkbox"/> TIME CALLER HUNG UP	
---	--

<input type="checkbox"/> PHONE NUMBER WHERE CALL WAS RECEIVED	
--	--

<input type="checkbox"/> EXACT WORDS OF THREAT	
---	--

ASK THE CALLER:

<input type="checkbox"/> WHERE IS THE BOMB LOCATED?	
<input type="checkbox"/> WHEN WILL IT GO OFF?	
<input type="checkbox"/> WHAT DOES IT LOOK LIKE?	
<input type="checkbox"/> WHAT KIND OF BOMB IS IT?	
<input type="checkbox"/> WHAT WILL MAKE IT EXPLODE?	
<input type="checkbox"/> DID YOU PLACE THE BOMB?	
<input type="checkbox"/> WHY?	
<input type="checkbox"/> WHAT IS YOUR NAME?	

INFORMAITON ABOUT THE CALLER:

<input type="checkbox"/> WHERE IS THE CALLER LOCATED (BACKGROUND AND LEVEL OF NOISE)	
<input type="checkbox"/> ESTIMATED AGE	
<input type="checkbox"/> IS THE VOICE FAMILIAR? IF SO, WHO DOES IT SOUND LIKE?	
<input type="checkbox"/> OTHER POINTS	
<input type="checkbox"/> CALLER'S VOICE (CIRCLE ALL THE APPLY)	Female / Male Accent / Angry / Calm / Clearing Throat / Coughing / Cracking Voice / Crying / Deep / Deep Breathing / Disguised / Distinct / Excited / Laughter / Lisp / Loud / Nasal / Normal / Ragged / Rapid / Raspy / Slow / Slurred / Soft / Stutter
<input type="checkbox"/> BACKGROUND SOUNDS	Animal Noises / House Noises / Kitchen Noises / Street Noises / Booth / PA System / Conversation / Music / Motor / Clear / Static / Office Machinery / Factory Machinery / Local / Long Distance
<input type="checkbox"/> THREAT LANGUAGE	Incoherent / Message Read / Taped / Irrational / Profane / Well Spoken

<input type="checkbox"/> OTHER INFORMATION	
---	--

CHECKLIST COMPLETED BY:	
--------------------------------	--