

# Bomb Threat Checklist

**Instructions:** Upon receipt of a telephoned bomb or other incident, complete this form and provide it to law enforcement authorities as soon as possible.

- Date and time of call: \_\_\_\_\_
- Phone Line call came in on: \_\_\_\_\_
- Phone number of caller (if available): \_\_\_\_\_
- Exact words of caller: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Questions to ask:

- When is the bomb going to explode? \_\_\_\_\_
- Where is the bomb? \_\_\_\_\_
- What does it look like? \_\_\_\_\_
- What kind of bomb is it? \_\_\_\_\_
- What will cause it to explode? \_\_\_\_\_
- Did you place the bomb? \_\_\_\_\_
- Why? \_\_\_\_\_
- Where are you calling from? \_\_\_\_\_
- What is your address? \_\_\_\_\_
- What is your name? \_\_\_\_\_

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## Characteristics of Call

Indicate caller characteristics (Circle):

Male	Female			
Child	Young Adult	Middle Age	Mature	Elderly
Accent:				
Local	Regional	Foreign		
Disguised	Nasal	Stutter	Lisp	Squeaky
Calm	Angry	Excited	Crying	Stressed
Slow	Fast	Deep	High Pitch	Slurred
Soft	Loud	Giggly	Broken	

Mispronounced words:

Unusual words / comments:

Were there any background noises?

Location where call was received: \_\_\_\_\_

Person receiving call: \_\_\_\_\_