BOMB THREAT INFORMATION CHECKLIST

Copy this sheet and place it near your phone.

**Caller’s voice:**
- Calm
- Angry
- Excited
- Slow
- Fast
- Soft
- Loud
- Laughter
- Crying
- Normal
- Slurred
- Distinct

**Exact wording of the threat:**

**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?

If the voice is familiar, who did it sound like?

**Threat language:**
- Well spoken
- Educated
- Foul
- Irrational
- Incoherent
- Taped
- Message read by threat maker

**Background sounds:**
- Street noises
- House noises
- PA system
- Music
- Office machinery
- Factory machinery
- Animal noises
- Voices
- Static
- Phone booth
- Local
- Long distance
- None

**Other:**

**REMARKS:**

**Exact wording of the threat:**

__________________________________________________________________________________________________________________________

__________________________________________________________________________________________________________________________

__________________________________________________________________________________________________________________________

__________________________________________________________________________________________________________________________

**Sex of caller:**

**Race/nationality of caller:**

**Age of caller:**

**Length of call:**

**Time of call:**

**IMMEDIATELY DIAL 911 OR 5-1111.**

Give responding officers this completed sheet.

Date: ___________________________ Job title: ___________________________

Name: ___________________________ Department name: ___________________________

Phone number: ___________________________