

# BOMB THREAT CHECKLIST



Date:	Time Caller Hung Up:	<b>If possible, have someone else contact 911</b>
Time:	Phone Number Where Call Received:	

## Ask Caller

Where is the bomb located? <small>Building, floor, room, etc.</small>	What will make it explode?
When will it go off?	Did you place the bomb?      Yes      No
What does it look like?	Why?
What kind of bomb is it?	What is your name?

## Exact Words of Threat

## Information About Caller

Where is the caller located? (Background/level of noise)	Estimated age:	Is voice familiar? If so, who does it sound like?
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**Caller's Voice:**

- |                 |                |         |
|-----------------|----------------|---------|
| Female          | Deep           | Normal  |
| Male            | Deep Breathing | Ragged  |
| Accent          | Disguised      | Rapid   |
| Angry           | Distinct       | Raspy   |
| Calm            | Excited        | Slow    |
| Clearing Throat | Laughter       | Slurred |
| Coughing        | Lisp           | Soft    |
| Cracking Voice  | Loud           | Stutter |
| Crying          | Nasal          |         |

**Background Sounds:**

- Animal noises
- House noises
- Kitchen noises
- Street noises
- Booth
- PA System
- Conversation
- Music

**Threat Language:**

- Incoherent
- Message Read
- Taped message
- Irrational
- Profane
- Well-spoken

Other Information: