

Bomb Threat Checklist



Place this card under your telephone

BOMB THREAT CHECK LIST QUESTIONS TO ASK:

1. When is the Bomb going to explode?

2. Where is the Bomb?

3. What does the Bomb look like?

4. What kind of Bomb is it?

5. What will make the Bomb explode?

6. What is the Explosive Type and Quantity?

7. Why did you place the Bomb?

8. What is your name?

9. Where are you?

10. What is your address:

EXACT WORDING OF THREAT:

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ACTION

Report call immediately to:

Phone Number:

Trace 111

Police Advised:

Date/Time:

Members name:

CALLER'S VOICE

Accent (specify):

Any impediment (specify):

Voice (loud, soft, etc):

Speech (fast, slow, etc):

Diction (clear, muffled):

Manner (calm, emotional, etc):

Did you recognise the voice?

If so, who do you think it was?

Was the caller familiar with the area?

THREAT LANGUAGE

Well spoken:

Incoherent:

Irrational:

Taped:

Message read by caller:

Abusive:

Other:

BACKGROUND NOISES

Street noises:

House noises:

Aircraft:

Voices: Standard call:

Music: 111/Cellular:

Machinery: STD:

Vehicle (Cellular):

Other:

OTHER

Sex of caller:

Estimated age:

CALL TAKEN

Date: / / Time:

Duration of call:

Number called:

RECIPIENT

Name (print):

Telephone number:

Signature: