



BOMB THREAT CALL FORM

Date: _____ Time call was received: _____ AM/PM How Received _____
Name of the Caller: _____ ☐ Male ☐ Female
Exact words of the threat: _____

Time the caller hung up: _____ AM/PM

Questions to ask:

1. **WHEN** is the device expected to go off? _____
2. **WHERE** is the device placed or located? _____
3. **WHAT** kind of device is it? (explosive/incendiary) _____
4. **WHAT** does it look like? _____
5. **WHY** are you doing this? (try to establish intent) _____
6. **WHAT** is your phone number? _____
7. **WHERE** are you calling from? _____

Description of caller's voice:

☐ Young ☐ Middle Age ☐ Old ☐ Matured

Tone of Voice (calm, excited) _____ Accent (type) _____

Background Noise: Yes/No. If yes, what does it sound like? _____

Other relevant remarks:

Name of the person that received the call: _____

Department: _____ Telephone Number: _____

Home Address: _____