



Bomb Threat Report Form

Questions to Ask:

When is the bomb going to explode? _____

Where is the bomb right now? _____

What kind of bomb is it? _____

What does it look like? _____

Why did you place the bomb? _____

Immediately upon receipt of a bomb threat *first* call the Building Management Office at 770.232-6080 and *second*, complete this form and take it to the Building Management Office or the Security Office as soon as possible.

Time and Date of this Report:

Date: _____

Time: _____

Time and Date Bomb Threat Received:

Date: _____

Time: _____

How Received:

Caller's name and Address (if known):

Exact Words of the Caller:

Caller's Identity:

Male Female Adult Juvenile Age:_____

Tone:

Loud Soft High Pitch Low Pitch Stutter

Speech:

Fast Slow Distorted Cursing Pleasant Lisp Disguised Poor

Language:

Excellent Good Fair Raspy Nasal

Accent:

Hispanic Caucasian Foreign Other:_____

Manner:

Poor Grammar	Well Spoken	Taped	Message Read	Rational
Irrational	Deliberate	Laughing	Calm	Angry
Intoxicated	Emotional			

Background Noise:

Office Machine	Factory Machine	PA System	Radios	Party
Static	Cellular Phones	Voices	Music	
Animals				
Quiet	Street Traffic	Airplanes	Trains	

Additional Information:
