



Privacy Breach Incident Form

Today's Date: _____

Location and Date of the incident	
Description of the incident	
Cause of the incident (if known)	
Estimated number of people affected and level of harm associated with the breach.	
Type of personal information involved	
Description of any action taken to contain the breach	
Has the privacy commissioner's office been notified?	

Has anyone been notified of the incident (affected individuals, law enforcement, others)	
What actions or policy changes have been made following the breach	

Details of the Incident:

Printed Name of Individual Completing Incident Form

Date

Signature of Individual Completing the Incident Form