

PDPC Template for Notification of Data Breach Incident

Basic information about the data breach incident

Is this a new notification or an update? *

☒ New notification ☐ Update

Is this data breach notification related to: *

☒ Financial Sector (e.g. MAS regulated entity)

Organisation details

Organisation Name *

Singapore Life Ltd.

Unique Entity Number (UEN) *

196900499K

Organisation Sector *

☒ Private

Organisation's Correspondence Address *

4 SHENTON WAY
#01-01 SGX CENTRE II
Singapore 068807

Contact details

Name of person making this notification *

<Data Risk team / Group DPO >

Designation

Email Address *

Contact Number *

Are you the DPO for your organisation? *

☐ Yes ☒ No

Name of DPO *

<Business/Function DPO>

Email Address of DPO *

Contact Number of DPO *

Details of incident

When did your organisation become aware of the incident? *

Date Time
☐ (Tick here if time is not confirmed)

Date of incident *

Date Time
☐ (Tick here if date is estimated) ☐ (Tick here if time is not confirmed)

Cause/Suspected Cause of incident * (select only one)

<input type="checkbox"/>	Human error												
<input type="checkbox"/>	System error												
<input type="checkbox"/>	<p>Cyber incident (e.g. malware, ransomware, DDoS, phishing)</p> <p>Was there any data exfiltration? *</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown</p> <p>Type of Cyber Incident *</p> <table><tr><td><input type="checkbox"/> DDoS</td><td><input type="checkbox"/> Unauthorized root access</td></tr><tr><td><input type="checkbox"/> Phishing</td><td><input type="checkbox"/> Others, please specify: *</td></tr><tr><td><input type="checkbox"/> Ransomware</td><td><input type="text"/></td></tr></table> <p>What was/were the type(s) of device/domain that was/were compromised? *</p> <table><tr><td><input type="checkbox"/> Server</td><td><input type="checkbox"/> Personal device (e.g. personal laptops, desktops, phones)</td></tr><tr><td><input type="checkbox"/> Online account</td><td><input type="checkbox"/> Others, please specify: *</td></tr><tr><td><input type="checkbox"/> Website</td><td><input type="text"/></td></tr></table>	<input type="checkbox"/> DDoS	<input type="checkbox"/> Unauthorized root access	<input type="checkbox"/> Phishing	<input type="checkbox"/> Others, please specify: *	<input type="checkbox"/> Ransomware	<input type="text"/>	<input type="checkbox"/> Server	<input type="checkbox"/> Personal device (e.g. personal laptops, desktops, phones)	<input type="checkbox"/> Online account	<input type="checkbox"/> Others, please specify: *	<input type="checkbox"/> Website	<input type="text"/>
<input type="checkbox"/> DDoS	<input type="checkbox"/> Unauthorized root access												
<input type="checkbox"/> Phishing	<input type="checkbox"/> Others, please specify: *												
<input type="checkbox"/> Ransomware	<input type="text"/>												
<input type="checkbox"/> Server	<input type="checkbox"/> Personal device (e.g. personal laptops, desktops, phones)												
<input type="checkbox"/> Online account	<input type="checkbox"/> Others, please specify: *												
<input type="checkbox"/> Website	<input type="text"/>												
<input type="checkbox"/>	<p>Theft of information (e.g. theft of physical devices or paper records containing personal data)</p> <p>Was there a police report made? *</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Is there any evidence that data had been misused? *</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unable to confirm</p> <p>Has your organisation managed to retrieve the information from the perpetrator? *</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Ongoing</p>												

Where is/are the affected database(s)/server(s) holding the personal data involved in this incident located? *

- ☐ Singapore
☐ Overseas
☐ Singapore and overseas

Does your organisation already have an investigation/incident report? *

- ☐ Yes. Please upload the incident report. *
- ☐ No. Please provide summary of the cause/suspected cause of incident and how your organisation first became aware of the breach *

How was personal data affected? * (select only one)

- ☐ Data was disclosed to unintended parties
- ☐ Data was encrypted/deleted and held ransom
- ☐ Data was exfiltrated
- ☐ Data was lost/deleted
- ☐ Others, please specify: *

Potential Risk of Data Breach to Data Subject(s) * (select where applicable)

- | | |
|--|---|
| <input type="checkbox"/> Threat to personal safety | <input type="checkbox"/> Loss of business opportunities |
| <input type="checkbox"/> Identity theft | <input type="checkbox"/> Loss of employment opportunities |
| <input type="checkbox"/> Financial loss | <input type="checkbox"/> No potential harm to data subject(s) |
| <input type="checkbox"/> Damage to reputation | <input type="checkbox"/> Others, please specify other potential risk of data breach to data subject(s): * |

Status of the incident *

- ☐ Ongoing
- ☐ Rectified

Indicate rectified date: *

Were there any other organisations affected? *

- ☐ Yes, please list them: *

- ☐ No
- ☐ To be confirmed

Details of Affected Personal Data

Type(s) of Personal Data Involved *

- | | | |
|----------------------------|---|---|
| Contact information | <input type="checkbox"/> name
<input type="checkbox"/> address | <input type="checkbox"/> personal email address
<input type="checkbox"/> telephone number |
| Identification information | <input type="checkbox"/> NRIC number
<input type="checkbox"/> passport number | <input type="checkbox"/> photograph
<input type="checkbox"/> date of birth |
| Additional information | <input type="checkbox"/> health information
<input type="checkbox"/> financial information
<input type="checkbox"/> life/health insurance information | <input type="checkbox"/> transaction information
<input type="checkbox"/> other information, please specify: * |

Number of Individuals Affected *

Are there any Singapore-based Individuals affected? *

- ☐ Yes, please state the number of Singapore-based individuals affected under each of the Personal Data involved: *

- ☐ No

Please state the number of Singapore-based Individuals Affected under each of the following type of Personal Data: *

Contact information	name <input type="text"/>	personal email address <input type="text"/>
	address <input type="text"/>	telephone number <input type="text"/>
Identification information	NRIC number <input type="text"/>	Photograph <input type="text"/>
	passport number <input type="text"/>	date of birth <input type="text"/>
Additional information	health information <input type="text"/>	transaction information <input type="text"/>
	financial information <input type="text"/>	other information, please specify: * <input type="text"/>
	life/health insurance information <input type="text"/>	<input type="text"/>

Action Taken by the organisation

Have the affected individuals been notified of the data breach incident? *

- ☐ Yes. Please attach a sample of the notification provided/to be provided *
- ☐ No and we do not intend to notify the affected individuals. Please provide the reason for not notifying the affected individuals *
- ☐ No but we intend to notify the affected individuals. Please attach a sample of the notification provided/to be provided *
- Intended to date: *

Did your organisation notify the PDPC within three (3) calendar days from the time the data breach was determined to meet the criteria for such notifications as defined under the PDPA? *

- ☐ Yes.
- ☐ No. Please explain why PDPC was not notified within three (3) calendar days *
- (800 characters limit)

Have any other authorities/agencies/organisations been notified of the data breach? (For e.g. Regulators, Data Controllers, etc) *

- ☐ Yes. Which other agency has been notified? *
- (800 characters limit)
- ☐ No

Has your organisation issued or does your organisation intend to issue a media statement? *

<input type="checkbox"/>	<p>Issued.</p> <p>Please attach a copy of the media statement *</p> <p>Date issued: *</p>
--------------------------	---

<input type="checkbox"/>	Intend to issue. Intended date of issue: * <input type="text"/>
<input type="checkbox"/>	No

Any other information relevant to the incident?

(800 characters limit)

Declaration

- By submitting the information above, I confirm that I am authorised to make this notification on behalf of the organisation mentioned above, and confirm that the account as stated above is true and correct to the best of my knowledge and belief.
- If this notification is filed pursuant to section 26D(1) of the Personal Data Protection Act 2012, I confirm that this notification includes all information prescribed by Regulation 5 of the Personal Data Protection (Notification of Data Breaches) Regulations 2021.
- I understand that any false or misleading information provided by me may constitute an offence under Section 51(3)(c) of the Personal Data Protection Act 2012 and/or section 182 of the Penal Code.
- I understand that the information provided by me in this notification will be used by the PDPC, the relevant sectoral regulator(s), and/or other government agencies for investigations and follow-up purposes in accordance with the relevant legislation(s) and/or regulation(s) that may be applicable.
- I further understand that the PDPC, the relevant sectoral regulator(s), and/or other government agencies may contact me to seek further information in relation to this notification.

<input type="checkbox"/>	I understand and agree to the above. *
--------------------------	--