Incident survey

Incident handling forms

Effortlessadmin

Who handled the incident?

Names of handlers:	
Date/time they arrived on site:	

Describe the affected systems:

Location of affected systems:	
System names:	
Network address:	
MAC address:	
List connected networks:	

Describe the physical security of the location of affected information systems:
(locks, security alarms, building access, etcetera)