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DATA BREACH FORM

APPLICANT DETAILS

BASIC INFORMATION OF THE DATA USER

Tick as appropriate Public Private NGO Other:.....

Entity Name:
.....

Entity Sector:
.....

License Number:
.....

ORGANISATION INFORMATION CONTACT

Phone Number	
Email	
Address	
State/province	
City	

DATA PROTECTION OFFICER CONTACT DETAILS

Name of the Data Protection Officer*: Mr. Mrs. Miss.

Email: [REDACTED]

Phone: [REDACTED]

Is it your first time that breach occur in your organisation?

Yes

No

Number of data breach victims

Please select type of organisation you are

- Government Agency
- Business and Corporation
- Nonprofit Organisation
- Educational Institution
- Healthcare Provider
- Financial Institution
- E-commerce Platform
- Social Media Company
- Telecommunication Company
- Others, please specify
- Research Institution
- Marketing Agency
- Employer
- Law Firm
- Technology Company
- Insurance Company
- Transportation Company
- Utilities and Energy Company
- Real Estate Agency

Information involved in the breach

Kind of the personal information involved in the breach.

- Name
- Address
- Email Address
- Phone Numbers
- Date of Birth
- Passport Number
- IP Addresses
- Vehicle Information
- Others, please specify
- Financial information
- Usernames and Passwords
- Health Information
- Social Media Profiles
- Employment Details
- Biometric Data
- Insurance Companies
- Educational Background

Description of the Breach

Please Describe the Breach

How did the organisation discover the breach?

- User Reports Security Monitoring Systems Endpoint Detection and Response (EDR) Solutions
- Incident Response Plans Security Audits and Assessments Third-Party Alerts

Was the breach caused by cyber incident?

- Yes
- No
- Others, please specify

When did the breach happened?

Date / Time

When did you discover the breach?

Date / Time

Is the breach likely to result in a high risk to data subject?

- Yes**
- No**
- Not yet given, Please give details

Have you taken any action to limit the breach?

- Establish a Data Breach Response Plan
- Implement Strong Access Controls
- Encrypt Sensitive Data
- Conduct Regular Security Audits
- Keep Software and Systems Updated
- Conduct Regular Employee Background Checks
- Others, please specify
- Secure Physical Access to Servers and Data Centers
- Limit Data Collection and Retention
- Collaborate with Cybersecurity Experts
- Conduct Vendor Security Assessments
- Regularly Backup Data

Have you told data subjects about the breach?

- Yes**
- No**
- If **No**, Please specify

Describe any further action you have taken/ or purpose to take as a result of the breach

I hereby declare that the information given in this application is true and correct to the best of my knowledge and belief.

Name: _____

Title: _____

Signature: _____

Date: ____/____/____