

1. Controller

This information is exclusively for the relevant Data Protection Authority. It should not be shared with third parties.

1.1 Details of the organization	
Company name:	
Address:	Postal code:
City:	Country:
1.2 Contact person (to obtain corresponding information)	
Name:	
Position:	
Address:	Postal code:
City:	Country:
Email address:	
Telephone no:	
1.3 Type of notification	
<input type="checkbox"/> Complete notification (Section 2 and Section 3 shall be completed 72h after becoming aware of the data breach.)	
<input type="checkbox"/> Two-step notification (Section 2 shall be completed 72h after becoming aware of the data breach, while Section 3 shall be completed within four weeks after becoming aware of the data breach.)	

2. Principal Information on the Personal Data Breach

To be filled out and shared with the Data protection Authority within the first 72 hours of being aware of the data breach.

2.1 Sector or affected party
<input type="checkbox"/> Manufacturing
<input type="checkbox"/> Electricity, gas, steam, and air conditioning supply
<input type="checkbox"/> Agriculture
<input type="checkbox"/> Construction
<input type="checkbox"/> Wholesale and retail trade
<input type="checkbox"/> Telecommunications
<input type="checkbox"/> IT and other information services
<input type="checkbox"/> Financial and insurance services
<input type="checkbox"/> Legal, accounting, management, architecture, engineering, technical testing, and analysis activities
<input type="checkbox"/> Scientific research and development
<input type="checkbox"/> Other (please specify):

2.2 Company size (number of employees)
<input type="checkbox"/> 1-9
<input type="checkbox"/> 10-49
<input type="checkbox"/> 50-249
<input type="checkbox"/> 250-749
<input type="checkbox"/> 750-1000
<input type="checkbox"/> > 1000
2.3 Company size (turnover)
<input type="checkbox"/> ≤ € 2 m
<input type="checkbox"/> ≤ € 10 m
<input type="checkbox"/> ≤ € 50 m
<input type="checkbox"/> > € 50 m

2.4 Country of the organization's headquarters				
Specify the country:				
2.5 Country where the breach took place				
Specify the country:				
2.6 Date and time of the breach				
Hour:	Minute:	Day:	Month:	Year:
2.7 Date and time of detection				
Hour:	Minute:	Day:	Month:	Year:
2.8 What caused the breach? (can be completed later in part 3.8 of the <i>Complementary information form</i>, if the cause is unknown at this time)				
<input type="checkbox"/> Malicious attack <input type="checkbox"/> Internal <input type="checkbox"/> External				
<input type="checkbox"/> Accident (system failure):				
<input type="checkbox"/> Negligence (human error):				
<input type="checkbox"/> Other (please specify):				
2.9 If the breach is a result of a malicious attack, what malicious attack caused the breach?				
<input type="checkbox"/> Trojans				
<input type="checkbox"/> Cryptolocker				
<input type="checkbox"/> Distributed denial of service (DoS)				
<input type="checkbox"/> Malware				
<input type="checkbox"/> CEO fraud				
<input type="checkbox"/> Blackmailing				
<input type="checkbox"/> Other (please specify):				

2.10 What is the likely impact of this breach?

- ☐ Data publication
- ☐ Data theft
- ☐ Identity theft or fraud
- ☐ Loss of data
- ☐ Loss of confidentiality of personal data
- ☐ Property damage
- ☐ Direct financial loss
- ☐ Business interruption
- ☐ Liability issues
- ☐ Damage to the reputation
- ☐ Other (please specify):

2.11 Type of data affected/exploited/stolen

- ☐ Personal
 - ☐ Sensitive (e.g., health/genetic data, etc.)
 - ☐ No sensitive

2.12 If the data is personal, what is the encryption status of the data?

- ☐ Full
- ☐ Partial
- ☐ None

2.13 Was the data breached subject to a Data Protection Impact Assessment?

- ☐ Yes
- ☐ No

2.14 What type of IT support does the organization have?

- ☐ Internal
- ☐ External

2.15 What measures have been taken to mitigate the negating effects of the data breach?

- ☐ Data recovery
- ☐ Erasure of malware or negative software
- ☐ Replacement of destroyed property

<input type="checkbox"/> External testing (i.e., ethical hackers, pen tests, etc.)
<input type="checkbox"/> Enhancement of data security measures
<input type="checkbox"/> Other (please specify):
2.16 Does the organization have insurance for the type of incident experienced?
<input type="checkbox"/> Yes
<input type="checkbox"/> No

3. Complementary Information

To be filled out and shared with the Data protection Authority within a maximum of four weeks after being aware of the data breach.

3.1 Date/time of when the attack ended				
Hour:	Minute:	Day:	Month:	Year:
3.2 Estimated financial damage				
3.3 The amount of personal datasets affected/exploited/stolen				
3.4 Have the data subjects been notified of the breach?				
<input type="checkbox"/> Yes				
<input type="checkbox"/> No				
3.5 How many data subjects have been notified?				
3.6 Estimated financial damage				
Cost of notification:		Financial damage:		
3.7 Did the organization take any corrective measures to prevent the data breach's recurrence?				
<input type="checkbox"/> Improvement of data security measures and, in particular: <input type="checkbox"/> Audit and redesign of data collection procedures <input type="checkbox"/> Audit and redesign of data processing procedures <input type="checkbox"/> Audit and re-evaluation of the data processor (if applicable) <input type="checkbox"/> Encryption of data at rest <input type="checkbox"/> No data security measures were taken <input type="checkbox"/> Other (please specify):				
3.8 The cause of the data breach				
<input type="checkbox"/> Malicious attack <input type="checkbox"/> Internal <input type="checkbox"/> External <input type="checkbox"/> Accident (system failure) <input type="checkbox"/> Negligence (human error) <input type="checkbox"/> Other (please specify):				
3.9 If known, please specify or reason behind the data breach, in case of a malicious attack?				

3.10 If known, please specify the exploit software used, in case of a malicious attack?

- ☐ Malware
- ☐ Ransomware
- ☐ Phishing
- ☐ SQL injection attack
- ☐ Cross-site scripting (XSS)
- ☐ Denial of service (Dos)
- ☐ Other (please specify):