

**Privacy Breach/Complaint Intake Form**

[Attach all relevant documentation including complaints and audits]

Today's Date: \_\_\_\_\_

Date of Incident: \_\_\_\_\_

Location of Incident: \_\_\_\_\_

Date Incident was Discovered: \_\_\_\_\_

Discovered/Reported by:

- ☐ Service recipient
- ☐ Family member or representative
- ☐ Team member
- ☐ Vendor

- ☐ Public
- ☐ Audit
- ☐ Privacy commissioner
- ☐ Other: \_\_\_\_\_

Name if applicable: \_\_\_\_\_

Contact information: \_\_\_\_\_

Type of incident:

- ☐ Hacking/malware/security breach
- ☐ Mobile device (USB, laptop, hard drive)
  - ☐ Lost
  - ☐ Stolen
- ☐ Paper copies
  - ☐ Lost
  - ☐ Stolen
- ☐ Wrong recipient
  - ☐ Fax
  - ☐ Email
  - ☐ Text

☐ Unauthorized collection by: \_\_\_\_\_

☐ Unauthorized use by: \_\_\_\_\_

☐ Unauthorized disclosure by and to: \_\_\_\_\_

☐ Other: \_\_\_\_\_

Details of the incident and how it was discovered/reported:

How many people affected?: \_\_\_\_\_

Does the incident include:

- ☐ **Risk of identity theft:** health card number, social insurance number, credit card information, driver's license, passport, banking information, home contact information
- ☐ **Risk of physical harm:** is there any indication that individuals affected are at risk of physical harm (harassment or stalking)