

ANNEXURE A

FORM SCN1


NOTIFICATION OF A SECURITY COMPROMISE IN TERMS OF SECTION 22 OF THE PROTECTION OF PERSONAL INFORMATION ACT, 2013 (ACT NO. 4 OF 2013)

Note:

1. *Attach documents in support of the notification*
2. *Complete the form in full as is applicable*
3. *If the space provided for in this Form is inadequate, submit information as an Annexure to this Form and sign each page.*

A	DETAILS OF RESPONSIBLE PARTY
Name(s) and Surname/Registered name of responsible party:	
Address:	
	Code ()
Contact Number(s):	
E-mail Address:	
B	DETAILS OF THE INFORMATION OFFICER
Full names of information officer	
Registration number of information officer	
Contact Number(s):	
E-mail Address:	
C	DETAILS OF SECURITY COMPROMISE
Date of incident	
Date incident reported to Information Regulator	
Explanation for delay in notification to the Regulator, if applicable	
Kindly tick applicable box ✓	

NOTIFICATION OF A SECURITY COMPROMISE

Type of security compromise	Loss of personal information:	<input type="checkbox"/>		
	Damage to personal information	<input type="checkbox"/>		
	Unauthorised destruction of personal information	<input type="checkbox"/>		
	Unlawful access to of personal information	<input type="checkbox"/>		
	Unlawful processing of personal information	<input type="checkbox"/>		
	Other	<input type="checkbox"/>		
	If other, please explain _____			
Description of incident				
				
Kindly tick applicable box ✓				
Type of personal information compromised	Personal information of children	<input type="checkbox"/>	Unique identifiers	<input type="checkbox"/>
	Special Personal Information	<input type="checkbox"/>	Other	<input type="checkbox"/>
Number of data subjects affected				

NOTIFICATION OF A SECURITY COMPROMISE

Method of notification to affected data subjects	Mail to the data subject's last known physical or postal address; <input style="float: right; width: 50px; height: 25px; border: 1px solid black;" type="checkbox"/> Sent by e-mail to the data subject's last known e-mail address; <input style="float: right; width: 50px; height: 25px; border: 1px solid black;" type="checkbox"/> Placed in a prominent position on the website of the responsible party; <input style="float: right; width: 50px; height: 25px; border: 1px solid black;" type="checkbox"/> Published in the news media <input style="float: right; width: 50px; height: 25px; border: 1px solid black;" type="checkbox"/>
Does the notification provide sufficient information to allow the data subject to take protective measures against the potential consequences of the compromise, including—	A description of the possible consequences of the security compromise; <input style="float: right; width: 50px; height: 25px; border: 1px solid black;" type="checkbox"/> A description of the measures that the responsible party intends to take or has taken to address the security compromise; <input style="float: right; width: 50px; height: 25px; border: 1px solid black;" type="checkbox"/> A recommendation with regard to the measures to be taken by the data subject to mitigate the possible adverse effects of the security compromise; <input style="float: right; width: 50px; height: 25px; border: 1px solid black;" type="checkbox"/> If known, the identity of the unauthorised person who may have accessed or acquired the personal information. <input style="float: right; width: 50px; height: 25px; border: 1px solid black;" type="checkbox"/>
Status of the compromise	Confirmed: <input style="width: 50px; height: 25px; border: 1px solid black; margin-left: 10px;" type="checkbox"/> Alleged: <input style="width: 50px; height: 25px; border: 1px solid black; margin-left: 10px;" type="checkbox"/>
D	Description of the measures that the responsible party intends to take or has taken to address the security compromise and to protect the personal information of the data subjects from further unauthorised access or use.
E	DECLARATION
I declare that the information contained herein is true, correct and accurate.	
SIGNED at _____ on this the _____ day of _____ 20____	
_____ Signature	
_____ Name	
_____ Designation	