**NOTIFICATION OF DATA BREACH TO DATA CONTROLLER**

*The Data Controller is notified by the board and/or the responsible party designated by the board. Updates to the questionnaire will always be made available to the Data Controller named at the end of this form as soon as possible.*

**Notification questionnaire**

1. **Data Controller's point of contact:**

|  |  |
| --- | --- |
| **Complete the details below:** | **CDDN** |
| Name: | Peter van Kooten |
| Position: | Director |
| Telephone: | 088 835 7000 |
| Email address: | [info@cddn.nl](mailto:info@cddn.nl) |

1. **Is this a follow-up to a previous report?**

|  |  |
| --- | --- |
| Select one of the options below. | Make a choice |
| 1. Yes |  |
| 1. No |  |

1. **What is the date of the original report?**

|  |  |
| --- | --- |
| (Answer this question if you answered yes to question 1). | Fill in |
| Date: |  |

1. **What is the scope of the follow-up report?**

|  |  |
| --- | --- |
| (Answer this question if you answered yes to question 1, select one of the following options). | Make a choice |
| 1. Add or amend information regarding the previous report |  |
| 1. Withdraw the previous report. |  |

1. **What is the reason for withdrawal??**

|  |  |
| --- | --- |
| (Answer this question if you selected option b for question 3). | Fill in |
| The reason for withdrawal is: |  |

1. **Provide a summary of the incident that caused the Personal Data security breach.**

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| --- |
|  |

1. **How many data subjects are affected by the data breach?**

|  |  |
| --- | --- |
|  | Enter the number |
| 1. At least: (complete) |  |
| 1. Maximum of: (complete) |  |

1. **Describe the group of people whose Personal Data was involved in the breach.**

|  |
| --- |
|  |

1. **When did the breach take place?**

|  |  |
| --- | --- |
| Select one of the following options: | Make a choice and complete |
| 1. On (date) |  |
| 1. Between (period start date and period end date). |  |
| 1. Unknown as yet |  |

**When was the breach discovered?**

|  |  |
| --- | --- |
| On (date) |  |

1. **What is the nature of the breach?**

|  |  |
| --- | --- |
| Reason | You can select more than one option |
| 1. Reading (confidentiality) | Yes/no |
| 1. Copying | Yes/no |
| 1. Changes (integrity) | Yes/no |
| 1. Removal or destruction (availability) | Yes/no |
| 1. Theft | Yes/no |
| 1. Unknown as yet | Yes/no |

1. **What type of Personal Data does it concern? You can select more than one option.**

|  |  |
| --- | --- |
| Type of Personal Data | You can select more than one option. |
| 1. Name and address details | Yes/no |
| 1. Telephone numbers | Yes/no |
| 1. Email addresses or other addresses for electronic communications | Yes/no |
| 1. Access or identification data (log in name / password or client number, for example) | Yes/no |
| 1. Financial data (account number, credit card number, for example) | Yes/no |
| 1. Citizen service number (BSN) or social security number | Yes/no |
| 1. Copies of passports or copies of other forms of identification | Yes/no |
| 1. Sex, date of birth and/or age | Yes/no |

|  |  |
| --- | --- |
| 1. Sensitive Personal Data (Race, ethnicity, criminal record, political affiliation, trade union membership, religion, sexual orientation, medical information, for example). | Yes/no If so, which |
| 1. Other data, namely (complete) |  |

1. **What consequences could the breach have for the privacy of the Data Subjects?**

|  |  |
| --- | --- |
| Consequences | You can select more than one option. |
| 1. Stigmatisation or exclusion | Yes/no |
| 1. Health risks | Yes/no |
| 1. Risk of (identity) fraud | Yes/no |
| 1. Risk of spam or phishing | Yes/no |
| 1. Something else, namely (complete). | Yes/no |

1. **What technical and organisational measures has your organisation taken to address the breach and to prevent further breaches?**

|  |
| --- |
|  |

1. **When was the data breach reported to the Data Controller?**

|  |  |
| --- | --- |
|  | Fill in |
| Date and time: |  |
| Point of contact for Data Controller: |  |
| Notification took place via: | Make a choice: |
| 1. Telephone |  |
| 1. Email |  |
| 1. Form |  |
| 1. Another way, namely |  |

1. **Has the Personal Data been encrypted, hashed, or otherwise rendered incomprehensible or inaccessible to unauthorised persons?**

|  |  |
| --- | --- |
|  | Select one of the options and supplement where necessary. |
| 1. Yes |  |
| 1. No |  |
| 1. Partly, namely (complete): |  |

1. **If the Personal Data has been rendered wholly or partly incomprehensible or inaccessible, in what way has this been done? (Answer this question if you selected option a or option c for question 14. If you used encryption, please explain the method of encryption).**

|  |
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|  |

1. **Do you believe this report to be complete?**

|  |  |
| --- | --- |
| Select one of the options below. | Make a choice |
| 1. Yes, the required information has been provided and no follow-up notification is necessary. |  |
| 1. No, a follow-up notification with additional information about this breach will follow later. |  |

**In conclusion:**

|  |  |
| --- | --- |
| Name of Data Controller signatory: |  |
| Place: |  |
| Date: |  |
| Signature: |  |

**Data Controller's point of contact:**

|  |  |
| --- | --- |
| Name: | Peter van Kooten |
| Position: | Director |
| Telephone: | 088 835 7000 |
| Email | [info@cddn.nl](mailto:info@cddn.nl) |

**MAKE FORM AVAILABLE TO THE FOLLOWING PERSON IMMEDIATELY:**

**Data Controller's point of contact:**

|  |  |
| --- | --- |
| **Name:** |  |
| **Position:** |  |
| **Mobile telephone:** |  |
| **Email** |  |

**The Data Controller received the form on:**

|  |  |
| --- | --- |
| Date and time: |  |