

CITY OF PHOENIX
NEIGHBORHOOD SERVICES DEPARTMENT
PII/RCI - INCIDENT REPORT AND ASSESSMENT

Date: Reported By (First and Last Name): Division

Supervisor: Deputy Director:

Incident Date: Date Incident Identified/Determined (If different than Incident Date):

Is this incident a Critical Breach as defined in NSD Policy 01-08? Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown <input type="checkbox"/>	Format of PII/RCI Electric <input type="checkbox"/> Paper <input type="checkbox"/>
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Provide a description of the incident.

What PII/RCI information was involved?

NSD Case or File Number(s) (If applicable)

Which NSD program does the incident pertain to? (If applicable)

Complete section if documents were/are missing?

What steps were taken to recover missing documents or information?

Last known location of PII/RCI documents (Staff and physical location).

Future Prevention:

Have you implemented any operational changes?

Acknowledgment of Receipt:

 Supervisor Signature Date

 NSD Security Officer Signature Date

 Division Deputy Signature Date

 Admin Services Deputy Director Signature Date

ASSESSMENT OF INCIDENT - To be completed by NSD Security Officer

Provide a description of Security Officer's assessment of incident reported and recommendations of corrective actions for the department or division, if needed.

 NSD Security Officer Signature Date

Final PII/RCI Incident Report and Assessment Reviewed:

 Administrative Services Deputy Director Signature Date

 NSD Director Signature Date

Final signed form with Director signature will be kept on file with NSD Security Officer and routed to Supervisor and Division Deputy Director. Follow-up corrective action shall be discussed with appropriate parties after final assessment.