

INCIDENT IDENTIFICATION

DATE UPDATED: _____

General Information

Incident Detector's Information:

Name: _____ Date and Time Detected: _____

Title: _____

Phone: _____ Alt. Phone: _____ Location Incident Detected From: _____

Mobile: _____ Pager: _____

Fax: _____ Alt. Fax: _____ Additional Information: _____

E-mail: _____

Address: _____

Detector's Signature: _____ Date Signed: _____

Incident Summary

Type of Incident Detected:

- Denial of Service
- Malicious Code
- Unauthorized Use
- Unauthorized Access
- Espionage
- Probe
- Hoax
- Other: _____

Incident Location:

Site: _____ How was the Incident Detected: _____

Site Point of Contact: _____

Phone: _____ Alt. Phone: _____

Mobile: _____ Pager: _____

Fax: _____ Alt. Fax: _____

E-mail: _____

Address: _____

Additional Information: _____
