Tasmanian Government

**Information Management Framework**

**Implementation Tool**

**Incident Notification Form** (Also available as an online form)

This Form supports the *Destruction Methods Standard, Information and Records Management Standard* and *Physical Storage Standard*.

**In the event of an emergency or imminent threat, please contact the Office of the State Archivist directly on 03 6165 5581.**

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| --- |
| Organisation name: |
| **Incident type:** |
| FloodingFire / smoke damageInappropriate disposal (eg records found at rubbish tip)Mould outbreakRodent infestation | TheftUnauthorised destruction of recordsOther ***[please specify]*** |

|  |  |
| --- | --- |
| **Contact name:** | **Position:** |
| **Telephone:** | **Email:** |
| **Date of incident:** | **Date of report:** |
| **Location of records:** |
| I confirm my organisation has supplied all relevant information about this notification.**Name:**  |
| **Signed:**(Chief Executive Officer or authorised delegate) | **Date:** |
| **Damage Assessment *[delete this box if not applicable]*** |
| The records covered in this incident notification are not salvageable as a result of (tick all that apply): |
| Approved retention period close to expiryExcessive damageHazard / health riskProhibitive salvage / restoration costsUnauthorised destruction of recordsOther ***[please describe]*** |
| **Impact Statement*****[Explain the impact of the loss of these records on your business, e.g. any current or pending legal action, Right to Information applications, critical business functions, sensitivity of information, etc.]*** |
| **Background*****[Provide background to the incident, and circumstances surrounding the loss.]*** |
| **Preliminary investigation*****[Summarise details of any internal incident investigation in progress or completed. Include information that may have contributed to the incident occurring, including lack of procedures/policy etc.]*** |
| **Intended action plan*****[Provide details of any intended action plan to mitigate future risk of a repeat incident. Include any proposed restoration/conservation plans for approval by our conservator. Also document any ability to reinstate and/or recreate the records from other sources, whether from back up tapes, business systems, external parties, etc. Note that additional actions may be recommended by our staff.]*** |
| Evidence***[Please attach any supporting evidence to this form. This may include photographs of the incident leading to the loss of State records, copies of assessor’s and/or investigation reports, statutory declarations about the loss of State records, etc.]*** |
| Affected Records |
| Date range | Records description | Qty | Format | Schedule No | Class ref | Retention | Can the record be recreated or sourced elsewhere? (Y/N) |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  | ***[insert extra rows as needed]*** |  |  |  |  |  |  |