



Privacy Incident Report (External) For use by the public

CC 950 (R2025-08)

Important: This PDF was designed to be filled in with Adobe Acrobat Reader only. If you are experiencing issues filling out this form, click here for help with your settings.

Submission Date (YYYY/MM/DD)

Your personal information is being collected pursuant to section 4(c) of the Protection of Privacy Act for the purpose of investigating the privacy complaint you have reported and responding to your complaint. This information may be input into an automated system to generate content or make decisions, recommendations, or predictions. If you have any questions about this collection, please contact the Access and Privacy Coordinator at 403-268-5861 (option 2) or AccessandPrivacy@calgary.ca.

This form is for members of the public to report suspected or confirmed incidents involving the loss of, unauthorized access to or unauthorized use or disclosure of personal information.
This form is not intended to be used for reporting incidents that do not involve personal information.

Important:

- Do not include personal information of any third parties when completing this form. If additional details are required or you have evidence to submit, an Access to Information and Investigations Analyst will contact you with instructions on how to submit this information securely.
- Please be aware that investigating your complaint may require sharing your name, personal information, or complaint details with City of Calgary business units or employees who may have been involved in the incident.

Once completed:

Email this report to AccessandPrivacy@calgary.ca or print it and mail it to:

Access and Privacy Coordinator
The City of Calgary #8007F
PO Box 2100, Station M
Calgary, AB T2P 2M5

If you have any questions or require further guidance about completing this report, contact Access to Information and Investigations at AccessandPrivacy@calgary.ca or (403) 268-5861 (option 2).

Contact Information	
Last Name	First Name
How do you want to receive correspondence from the Access to Information and Investigations Office? <input type="checkbox"/> Mail <input type="checkbox"/> Email	

Based on your correspondence preference, please provide one of the following: mailing address or email address.

1. Mailing Address	City or Town	Province	Postal Code
2. Email Address			Phone Number (Optional)

Incident Description

Type of Complaint:

- Loss of your personal information
- Unauthorized access to your personal information
- Unauthorized disclosure of your personal information
- Unauthorized use of your personal information

Please describe the incident and include as much detail as possible. E.g. date and time of incident, City of Calgary business unit(s) involved, job title of employee(s) involved, etc.

Personal Information Involved

- Name
- Contact Information
- Demographic Information (e.g. ethnicity, age, sex)
- Identifying Number (e.g. SIN, Alberta health care number, employee ID number)
- Financial Information
- Medical Information
- Other Information (specify) _____

Notification

Have you notified anyone else at The City of Calgary about this incident? Yes No

If yes, whom?