# **APPENDIX G: Sample Breach Notice: Unique Biometric Data**

[Agency Letterhead]

[Date]

[Addressee] [Mailing Address] [City] [State] [Zip Code]

[Salutation]

## **Subject: NOTICE OF DATA BREACH**

| **What Happened?** | [*Describe what happened in general terms, see example below*]  We are writing to you because of a recent security incident that occurred on [*date of incident]* at *[name of organization*]. ABC Solutions, Inc. is contracted with the Department of Emergency Management to support use of biometric data for customer access to its online Emergency Management systems. Unique biometric data is defined as generated from measurements or technical analysis of human body characteristics, such as fingerprint, retina, or iris image, used to authenticate a specific individual. Unique biometric data does not include a physical or digital photograph, unless used or stored for facial recognition purposes  On October 12, 2019 an inadvertent system configuration error lead to a five-hour exposure of the biometric data maintained by ABC Solutions. The error was immediately corrected upon discovery. |
| --- | --- |
| **What Information Was Involved?** | [*Describe what specific notice-triggering data element(s) were involved, see example below*]1  Please note, the information was limited to *your account name and fingerprints* and did not contain any other information, such as Social Security number, Driver's License number, California Identification Card Number, tax identification number, passport number, military identification number, or other unique identification number issued on a government document, or financial account numbers which  could expose you to identity theft. Nonetheless, we felt it necessary to inform you since your personal biometric data was involved. |
| **What We Are Doing:** | [*Note apology and describe what steps your agency is taking, has taken, or will take, to investigate the breach, mitigate any losses, and protect against any further breaches, see example below*]  We regret that this incident occurred and want to assure you that we are reviewing and revising our procedures and practices to minimize the risk of recurrence. |
| **What You Can Do:** | If you use biometric data to access any accounts, we recommend you choose another form of authentication to protect against unauthorized access |
| **Other Important Information:** | Enclosure “ Breach Help –Consumer Tips from the California Attorney General ” |
| **For More Information:** | For information about your privacy rights, you may visit the website of the California Department of Justice, Privacy Enforcement and Protection at [www.oag.ca.gov/privacy.](http://www.oag.ca.gov/privacy) |
| **Agency Contact:** | Should you need any further information about this incident, please contact [*name of the designated agency official or agency unit handling inquiries*] at [*toll-free phone number*]. |

[Signature of State Entity Head or Delegate] [Title]