



## Department of Energy Information Protection Task Force - SSN Reduction Project Baseline Inventory

	1. Departmental Element	2. System Name/ Major Application Name	3. Location	4. Name of System Owner/ Information or Data Owner	5. Contact Information	6. Does the system collect or maintain Social Security numbers?	7. Source of Legal Requirement/Authority to Collect or Maintain Social Security Numbers?	8. Does the system have a Privacy Impact Assessment (PIA)?	9. Does the system have a System of Records Notice (SORN)? If yes, provide the name of the System of Records Notice.	10. Does the system collect or maintain other forms of PII?	Comments
SAMPLE	MA	Health System	Forrestal 1G-040	Jane Q. Public	<a href="mailto:japublic@hq.doe.gov">japublic@hq.doe.gov</a> (202) 586-5555	Yes	Executive Order 1234XYZ	Yes	No	Yes	
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Please see guidance on Defining Information System for the Baseline Inventory provided on the Privacy website. Please also indicate if the system is hosted on a General Support System and provide the name of the GSS.

If the System Owner has designated an Information/data Owner, please indicate and add that information on a separate line.

The collection or use of SSNs must be to accomplish a stated purpose of the Department required by statute, regulation, Executive Order or DOE Directive.  
  
Enter the source (e.g. E.O. 12345) or "None" for systems that collect or maintain SSNs. Enter N/A for systems that do not collect or maintain SSNs.