



# Central Depository Services (India) Limited

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## COMMUNIQUÉ TO DEPOSITORY PARTICIPANTS

CDSL/IS/DP/POLCY/2026/221

March 30, 2026

### QUARTERLY CYBER INCIDENT REPORTING BY DPs

DPs are advised to refer to SEBI circular No: SEBI/HO/MIRSD/TPD/P/CIR/2022/93 dated June 30, 2022, and CDSL/OPS/DP/POLCY/2025/27 January 10, 2025, wherein all Cyber-attacks, threats, cyber-incidents and breaches experienced by Depositories Participants shall be reported to CDSL.

In view of the above, Depository Participants are hereby informed that CDSL has a facility for online submission for quarterly cyber incident reporting through an audit web portal. Depository Participants **must submit a mandatory quarterly report** to CDSL on all the cyber-attacks, threats, incidents, breaches, **within 15 days after the end of each quarter**.

The deadline for quarterly cyber incident reporting for the **Q4 (January– March 2026)** is **15<sup>th</sup> April 2026** in audit web portal, failing which will be **treated as non-compliance and penalty will be levied** as per communique no: **CDSL/AUDIT/DP/POLCY/2025/105 February 12, 2025**.

For submitting the **quarterly cyber incident report** to CDSL, please refer **Annexure A**.

Queries regarding this communiqué may be addressed to CDSL –emails may be sent to: [dpinfosec@cdslindia.com](mailto:dpinfosec@cdslindia.com) and connect through our IVR Number 022-62343333.

For and on behalf of  
Central Depository Services (India) Limited

sd/-

**Mrugen Vijay Munjpara**  
Assistant Vice President – Information Security



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### Annexure A

#### Guidelines to submit Quarterly Cyber Incident Report

1. Open the Audit Web Portal.

- Link: <https://auditweb.cdslindia.com/Login.aspx>
- Click on Login Type and select “**Designated Officer**” login.



#### AUDIT APPLICATION

**SIGN IN**

Login Type: Designated Officer

User ID: --Select--

Password: [Redacted]

Forgot password      Registration for DP / RTA

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2. Fill the below required information and click on “**Sign In**” Button:

- User ID, Password & Captcha



#### AUDIT APPLICATION

**SIGN IN**

Login Type: Designated Officer

User ID: [Input Field]

Password: [Input Field]

Captcha: 7afff1

Sign In

Forgot password      Registration for DP / RTA

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### 3. Enter the OTP:

- You will receive the OTP on both your DP's registered mobile number and email Id.



### AUDIT APPLICATION

**LOGIN OTP**

Enter OTP

OTP Time :- 00:09:57 Do not refresh the page

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### 4. Select required information for submitting quarterly “Cyber Incident” report:

- Select Audit Type: **CYBER INCIDENT REPORT**
- Select Audit Month: **Select quarter month**
- Select DP/RTA: **Select your DP ID**
- Click on the “Confirm” Button

**AUDIT APPLICATION**

Reports

Select Audit Type: CYBER INCIDENT REPORT

Select Audit Month: [Dropdown]

Select DP / RTA: [Dropdown]

[View Cyber Report](#) [View Compliance](#) [View Resubmission](#)  
[Cyber Audit Compliance Report](#) [Cyber RCA Report](#)



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5. The following screen will appear. Main DP can mention the branch DP IDs , if they are submitting consolidated report for branch DP IDs.

**CYBER INCIDENT REPORT**

Audit Type	CYBER INCIDENT REPORT	DP Name(ID)	
Audit Month		Period	
DP ID			

Cyber Incident Report covers the following Branch DPIDs :-

6. Fill in the details in the prescribed format in:

1. Letter/Report Subject
2. Reporting Periodicity Year
3. Designated Officers details.

**Incident Reporting Form**

**1. Letter/Report Subject**

NAME OF THE DEPOSITORY PARTICIPANT: UNIQUE INCIDENT No. :- 1

NAME OF DEPOSITORY: CDSL Financial Year = 2024-2025

MEMBER ID / DP ID

**2. Reporting Periodicity Year**

QUARTER 4 [ JAN-2024 TO MAR-2024 ]

**3. Designated Officer (Reporting Officer details)**

* NAME	Name	* ORGANIZATION	Organization name
TITLE	Title	* EMAIL ID	Email ID
PHONE / FAX NO.	Phone / Fax No	* MOBILE	Mobile
ADDRESS	Address		

7. Select the option **NO** in Cyber-attack/breach observed in Quarter: (If no incident has occurred)

**Cyber-attack / breach observed in Quarter**

Yes  No (IF YES, PLEASE FILL ANNEXURE I) (IF NO, PLEASE SUBMIT THE NIL REPORT ONLY AFTER THE END OF QUARTER)

DATE & TIME: dd-MMM-yyyy | Hour | Minutes | PM  
(Select the Date between 01-Jul-2023 To 30-Sep-2023 )

BRIEF INFORMATION ON THE CYBER ATTACK / BREACH OBSERVED: Brief information on the Cyber-attack

[ANNEXURE I](#)

Save Submit to CDSL Clear Attach Files View Incident

The Report is submitted as NIL report.



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Please note that if you save the report as **NIL** without submitting it to CDSL, then upon re-login, when you attempt to submit the report, you will receive the following message.

**Popup Message --> You are not allowed to submit the Incident, as it is already added/Submit as a NIL Report for this quarter.**

If you receive the above popup message, please click on the Submit to CDSL button.

**To avoid such popup messages, kindly ensure that the report is first saved and then submitted to CDSL.**

8. Select the option **Yes** in Cyber-attack/breach observed in Quarter and fill the below required information: **(if the incident occurred)**

- Date & Time
- Brief information on the Cyber attack
- Then Click on Annexure I

Cyber-attack / breach observed in Quarter

Yes  No (If YES, PLEASE FILL ANNEXURE I) (If NO, PLEASE SUBMIT THE NIL REPORT ONLY AFTER THE END OF QUARTER)

\* DATE & TIME: 10-Jul-2024 04:15 PM (Select the Date between 01-Jan-2024 To 31-Mar-2024 )

\* BRIEF INFORMATION ON THE CYBER ATTACK / BREACH OBSERVED: Brief information on the Cyber-attack

[ANNEXURE I](#)

9. Fill the **Annexure I**:

1. Physical location of affected computer/ Network and name of ISP
2. Date incident occurred
3. Information of affected system
4. Select the type/types of incident
5. Description of incident



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**Annexure I**

**1. Physical location of affected computer / Network and name of ISP**

Physical location of affected computer / Network and name of ISP

**2. Date incident occurred**

OCURRED     \*  
(Select the Date between 01-Jan-2024 To 31-Mar-2024 )

IDENTIFIED     \*

**3. Information of affected system**

IP ADDRESS  COMPUTER / HOST NAME

LAST PATCHED / UPDATED  OPERATING SYSTEM (INCL. VER / RELEASE NO.)

HARDWARE VENDOR / MODEL

**4. Type of incident**

PHISHING  WEBSITE DEFACTION  BOT/BOTNET  DISTRIBUTED DENIAL OF SERVICE(DDoS)  SOCIAL ENGINEERING  RANSOMWARE

NETWORK SCANNING / PROBING BREAK-IN/ROOT  SYSTEM MISUSE  EMAIL SPOOFING  USER ACCOUNT COMPROMISE  TECHNICAL VULNERABILITY  OTHER

VIRUS/MALICIOUS CODE  SPAM  DENIAL OF SERVICE(DoS)  WEBSITE INTRUSION  IP SPOOFING

**5. Description of Incident**

Description of incident

### 10. Fill the below Information:

- Select Unusual behaviour/symptoms (Tick the symptoms)
- Fill the Details of unusual behaviour/symptoms
- Has this problem been experienced earlier? If Yes, Give the description

**6. Unusual behavior/symptoms (Tick the symptoms)**

<input type="checkbox"/> SYSTEM CRASHES	<input type="checkbox"/> CHANGES IN FILE LENGTHS OR DATES
<input type="checkbox"/> NEW USER ACCOUNTS/ ACCOUNTING DISCREPANCIES	<input type="checkbox"/> ATTEMPTS TO WRITE TO SYSTEM
<input type="checkbox"/> FAILED OR SUCCESSFUL SOCIAL ENGINEERING ATTEMPTS	<input type="checkbox"/> DATA MODIFICATION OR DELETION
<input type="checkbox"/> UNEXPLAINED, POOR SYSTEM PERFORMANCE	<input type="checkbox"/> DENIAL OF SERVICE
<input type="checkbox"/> UNACCOUNTED FOR CHANGES IN THE DNS TABLES, ROUTER RULES, OR FIREWALL RULES	<input type="checkbox"/> DOOR KNOB RATTLING
<input type="checkbox"/> UNEXPLAINED ELEVATION OR USE OF PRIVILEGES OPERATION OF A PROGRAM OR SNIFFER DEVICE TO CAPTURE NETWORK TRAFFIC	<input type="checkbox"/> UNUSUAL TIME OF USAGE
<input type="checkbox"/> AN INDICATED LAST TIME OF USAGE OF A USER ACCOUNT THAT DOES NOT CORRESPOND TO THE ACTUAL LAST TIME OF USAGE FOR THAT USER	<input type="checkbox"/> UNUSUAL USAGE PATTERNS
<input type="checkbox"/> A SYSTEM ALARM OR SIMILAR INDICATION FROM AN INTRUSION DETECTION TOOL	<input type="checkbox"/> UNUSUAL LOG FILE ENTRIES
<input type="checkbox"/> ALTERED HOME PAGES, WHICH ARE USUALLY THE INTENTIONAL TARGET FOR VISIBILITY, OR OTHER PAGES ON THE WEB SERVER	<input type="checkbox"/> PRESENCE OF NEW SETUID OR SETGID FILES CHANGES IN SYSTEM DIRECTORIES AND FILES
<input type="checkbox"/> ANOMALIES	<input type="checkbox"/> PRESENCE OF CRACKING UTILITIES
<input type="checkbox"/> SUSPICIOUS PROBES	<input type="checkbox"/> ACTIVITY DURING NON-WORKING HOURS OR HOLIDAYS
<input type="checkbox"/> SUSPICIOUS BROWSING NEW FILES	<input type="checkbox"/> OTHER

**7. Details of unusual behavior/symptoms**

Details of unusual behavior

**8. Has this problem been experienced earlier? If Yes, details  Yes  No**



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11. Fill the below Information:

- Agencies notified
- IP Address of apparent or suspected source
- How many host(s) are affected?

**9. Agencies notified**

LAW ENFORCEMENT	<input type="text" value="Law Enforcement"/>	PRIVATE AGENCY	<input type="text" value="Private Agency"/>
AFFECTED PRODUCT VENDOR	<input type="text"/>	OTHER	<input type="text"/>

**10. IP Address of apparent or suspected source**

SOURCE IP ADDRESS	<input type="text"/>	OTHER INFORMATION AVAILABLE	<input type="text"/>
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**11. How many host(s) are affected?**

1 to 10  10 to 100  MORE THAN 100

**12. Details of actions taken for mitigation and any preventive measure applied**

[Save](#) [Submit to CDSL](#) [Attach Files](#) [View Incident](#)

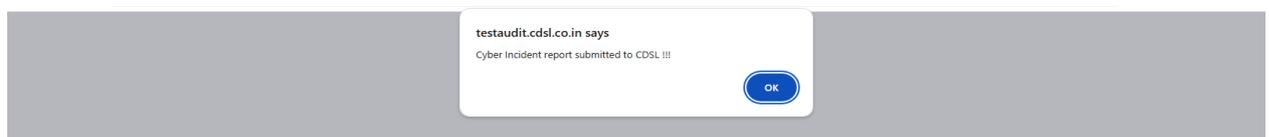
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**Attach Files:** Click "**Attach Files**" to upload relevant documents.

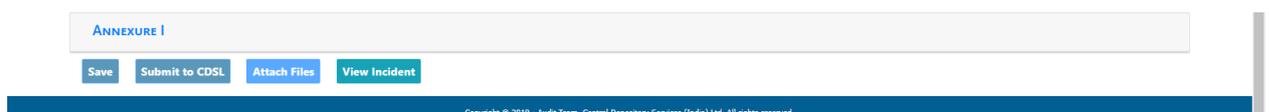
**Save:** Click "Save" to save your information as a draft.



Records are added successfully



**Submit to CDSL:** Click "**Submit to CDSL**" to officially submit your report.



**View Incident:** Click "**View Incident**" to see your submitted reports history.



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**Note:**

- All incidents report activities must be completed in one continuous action, from saving to submitting the incident report.
- Once you submit the incident report, it cannot be submitted again.
- When you re-login, the scheduled month/DP ID will not appear, that means you have already submitted the incident report.

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