



SLED CJIS SITE SECURITY SURVEY

**Rev. 1f
01/14/2004**

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Overview and Instructions

This survey is used to verify that your agency meets all SLED CJIS, FBI NCIC, and NLETS security and technical requirements prior to connecting to the SLED CJIS network using TCP/IP.

Thoroughly complete this questionnaire to ensure your agency and SLED/CJIS will continue maintaining compliance with FBI NCIC and NLETS security requirements.

Certain questions in this survey may require information from an agency's Terminal Access Coordinator and technical support personnel.

Answer all questions that apply to your agency. If you are unsure about any question, please call SLED CJIS for assistance @ (803) 896-7142.

You can enter "NA" to any question that does not apply to your agency.

Responses may be written instead of typed to save time but please write legible.

Remember to date and sign form on next page before returning.

Your time and cooperation in completing this form is greatly appreciated!

Mail Response to:

Control Terminal Officer
SLED CJIS
PO Box 21398
Columbia, S.C. 29221

Fax Response to:

(803) 896-7022
Attn: Control Terminal Officer

1.0 - Agency Survey Information

*** Mandatory information – If received incomplete, the form will be returned.**

Law Enforcement____ Criminal Justice____ Other____

* Agency Name: _____

* Agency Address: _____

* Responder's Name/Title: _____

* Phone Number: _____ Fax Number: _____

E-Mail Address: _____

* Location of Agency's data line determination from Telco (Demarc):

• Address: _____ Floor: _____ Room
Number: _____

• Request Date for
Installation: _____

• Will the router be located in this area ? _____

• Is an extended demarc request ? _____ Yes _____ No

• If yes, where is the extended to be installed? _____

By signing this document, I certify that the information in this document to be factual and agree to inform SLED/CJIS Network Security Office 30 days before any changes to your network and to obtain approval prior to implementation of these proposed changes.

*Signature: _____

*Date Completed: _____

2.0 Agency Terminal Access Coordinator Information

*Terminal Access Coordinator (TAC) Name: _____

*Phone Number: _____ Fax Number: _____

E-Mail Address: _____

- * 1. SLED/CJIS fingerprint background checks processed on ALL Users and Technical Support Personnel that have access to your network in any way. Yes ____ No ____
(If No, give the date when backgrounds will be completed: _____)
- * 2. All users that have access to SLED/CJIS information been through the SLED/CJIS certification course. Yes ____ No ____
(If No, give the date when certification will be completed: _____)
- * 3. Devices used to obtain SLED/CJIS information are or will be secured from public and non-criminal justice view and access? Yes ____ No ____

3.0 Agency Network Administrator

(If Applicable)

- * Network Administrator: _____
- * Phone Number _____ Fax Number _____
- E-Mail Address: _____

4.0 Agency Security Officer Information

- * Security Officer: _____
- * Phone Number: _____ Fax Number _____
- E-Mail Address: _____

5.0 Technical Support Information

Complete the following when another Agency/Vendor provides technical support for your Criminal Justice Agency: Government agency _____ Private Vendor _____

- * Support Name: _____
- * Support Address: _____
- * Support Contact: _____

* Phone Number: _____ Fax Number: _____

E-Mail Address: _____

* List the Services that are provided by the Support Entity to your Agency:

Enter any additional technical support information below:

If the support is provided by a vendor a security addendum between your agency and this vendor may be required.

6.0 - Network Information

Answer all applicable questions below

* 1. Existing agreements with SLED/CJIS Yes ___ No ___ If YES, Type _____

* 2. Types of TCP/IP devices your authorized Criminal Justice users use to obtain SLED/CJIS information. Please indicate the number of each device requested. Combination of several can run across a dedicated line.

PC access (individual stations accessing SLED with a specific terminal id)

___ PC Workstation

___ use a 3rd party vendor NCIC2000 workstation software (dedicated line required)

Name of Vendor required here: _____

___ use LEMS.WEB browser workstation software (dedicated line or Internet access)

___ use TNUTS (interim software for NCIC/SCIC access end of life Dec 31,2003)
(uses screen formats from SLED/CJIS host)

Foreign host interface (dedicated line required)

(Program to Program socket connection using DMPP-2020 protocol; screen formats are created/maintained by agency host)

___ Mainframe foreign host interface List type and operating system: _____

___ File Server List type and operating system: _____

Number of each type of device behind interface

___ 2-Way Mobile pager ___ CAD workstation ___ MDT interface

___ Workstations ___ Other

AFIS devices (dedicated line required)

___ LiveScan AFIS ___ Latent AFIS ___ Verification AFIS

4. Line Speed requested: ___ 64K ___ T1 ___ Fractional T1 ___ Internet

5. CAT 5, installed to each device location prior to CJIS/SCIC connection. ___ Yes ___ No
(If No, give the date of installation: _____)

6. All devices used to obtain and route SLED/CJIS information to be password protected?

Yes ___ No ___

7. All devices used to obtain SLED/CJIS information have their own unique, permanent terminal identifier?

Yes ___ No ___

8. Existing local area network (LAN) and/or wide area network (WAN) that is connected or will be connected to the SLED/CJIS Network? Yes ___ No ___

9. List the IP addresses used by your agency. (If IP addresses are public ones, denote if they were assigned to you officially). In most cases IP addresses will be assigned from the private IP scheme SLED uses and you will have to technically translate them prior to router access.

10. Other agencies connected to or sharing your Local Area Network (LAN).

Yes ____ No ____

If YES, please list this agencies here. Make sure they are in the network diagram also. Indicate whether they are criminal justice, law enforcement, or non-law enforcement.

11. You **MUST** provide a **DETAILED DIAGRAM** of your network with the proposed NCIC stations and description of all agencies and departments attached. This diagram should show the placement of your wiring, hub/switch, and demarc. Please attach to the completed survey. (If not attached, your request will be sent back to you and your connection will be delayed until we received this vital information.)

12. Do you have management control over your entire network? Yes ____ No ____
(If NO, who has management control _____)

Agency Name

13. Will SLED/CJIS information be passed over any portion of the network where all personnel and equipment are **not** under criminal justice management control? Yes ____ No ____

14. Does your network have a dedicated Internet connection? Yes ____ No ____

15. Do you have a firewall? Be sure to show firewall location in your network diagram.

Yes ____ No ____

If YES, then furnish the following information:

Firewall Brand _____

Is logging activated? _____

How often is this log reviewed? _____

Person assigned to support firewall information.

Name _____ Agency _____

Department _____ Contact Number _____

16. Does your firewall also protect additional agencies **other** than your own from the Internet?

Yes ____ No ____

If YES, List other agencies sharing your firewall.

17. Are any users allowed access to your network from outside the firewall? Yes ____ No ____

18. Are any users outside of the firewall allowed access to SLED/CJIS information?

Yes ____ No ____

19. Do you allow remote access **into your network**? Be sure to show remote access device location in your diagram. Yes ____ No ____

If YES, then furnish the following information:

Device Brand _____
Is logging in effect for successful and unsuccessful attempts? _____
How often is this logged reviewed? _____

Person assigned to support remote access
Name _____ Agency _____

Department _____ Contact Number _____

20. Do you allow remote access devices to access SLED/CJIS information? Yes ___ No ___

21. Type of security modes used to allow remote access:

_____ auto dial back _____ user identifier password, _____ encryption _____ other

22. Users allowed access to your network via your remote access device and justification.

Name	Agency	Justification
_____	_____	_____
_____	_____	_____

23. Do you allow modems attached to your individual PC's? Yes ___ No ___

24. Do you allow remote dial-in to individual PC's on your network used for accessing SLED/CJIS information? Yes ___ No ___

25. List the purposes PC modems are used and what security methods are in place especially for Dial-In purposes?

Modem Use	Security Used
_____	_____
_____	_____

Person assigned to support PC workstation devices
Name _____ Agency _____
Department _____ Contact Number _____