

**Reliability Standard Audit Worksheet for British Columbia**

# CIP-007-5 — Cyber Security – System Security Management

# Reliability Standard Effective Date for BC: October 1, 2018

***The Compliance Monitor Administrator must complete this section***

**Registered Entity:** [Name & ACRO]

**WCR Number:** WCRXXXXX

**Compliance Assessment Date:** [Audit start date – audit end date]

**Compliance Monitoring Method:** [Audit Type]

**Applicable Function(s):** BA, DP, GO, GOP, TO, TOP

**Names of Auditors:**

Findings Table:

|  |  |  |  |
| --- | --- | --- | --- |
| Req. | Finding | Summary and Documentation | Functions Monitored |
| [R1](#R1_Summary) |  |  | BA, DP, GO, GOP, TO, TOP |
| [R2](#R2_Summary) |  |  | BA, DP, GO, GOP, TO, TOP |
| [R3](#R3_Summary) |  |  | BA, DP, GO, GOP, TO, TOP |
| [R4](#R4_Summary) |  |  | BA, DP, GO, GOP, TO, TOP |
| [R5](#R5_Summary) |  |  | BA, DP, GO, GOP, TO, TOP |

|  |  |
| --- | --- |
| Req. | Areas of Concern |
|  |  |
|  |  |
|  |  |

|  |  |
| --- | --- |
| Req. | Recommendations |
|  |  |
|  |  |
|  |  |

# **Subject Matter Experts**

Identify subject matter expert(s) responsible for this Reliability Standard. Insert additional lines if necessary.

**Registered Entity Response (Required):**

|  |  |  |  |
| --- | --- | --- | --- |
| **SME Name** | **Title** | **Organization** | **Requirement(s)** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**R1 Supporting Evidence and Documentation**

**R1.** Each Responsible Entity shall implement, in a manner that identifies, assesses, and corrects deficiencies, one or more documented processes that collectively include each of the applicable requirement parts in *CIP-007-5 Table R1 – Ports and Services*. *[Violation Risk Factor: Medium] [Time Horizon: Same Day Operations.]*

**M1.** Evidence must include the documented processes that collectively include each of the applicable requirement parts in *CIP-007-5 Table R1 – Ports and Services* and additional evidence to demonstrate implementation as described in the Measures column of the table.

| **CIP-007-5 Table R1– Ports and Services** | | | |
| --- | --- | --- | --- |
| **Part** | **Applicable Systems** | **Requirements** | **Measures** |
| 1.1 | High Impact BES Cyber Systems and their associated:   1. EACMS; 2. PACS; and 3. PCA   Medium Impact BES Cyber Systems with External Routable Connectivity and their associated:   1. EACMS; 2. PACS; and 3. PCA | Where technically feasible, enable only logical network accessible ports that have been determined to be needed by the Responsible Entity, including port ranges or services where needed to handle dynamic ports. If a device has no provision for disabling or restricting logical ports on the device then those ports that are open are deemed needed. | Examples of evidence may include, but are not limited to:   * Documentation of the need for all enabled ports on all applicable Cyber Assets and Electronic Access Points, individually or by group. * Listings of the listening ports on the Cyber Assets, individually or by group, from either the device configuration files, command output (such as netstat), or network scans of open ports; or * Configuration files of host-based firewalls or other device level mechanisms that only allow needed ports and deny all others. |

**Registered Entity Response (Required):**

Describe, in narrative form, how you meet compliance with this requirement.

Registered Entity Evidence (Required):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| The following information is requested for each document submitted as evidence. Also, evidence submitted should be highlighted and bookmarked, as appropriate, to identify the exact location where evidence of compliance may be found. | | | | | |
| **File Name** | **Document Title** | **Revision or Version** | **Document Date** | **Relevant Page(s) or Section(s)** | **Description of Applicability of Document** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

Audit Team Evidence Reviewed (This section to be completed by the Compliance Monitor Administrator):

|  |
| --- |
|  |
|  |
|  |

Compliance Assessment Approach Specific to Part 1.1

***This section to be completed by the Compliance Monitor Administrator***

|  |  |
| --- | --- |
|  | Verify the Responsible Entity has documented one or more processes to enable only logical network accessible ports that have been determined to be needed by the Responsible Entity, including port ranges or services where needed to handle dynamic ports, where technically feasible. If a device has no provision for disabling or restricting logical ports on the device then those ports that are open are deemed needed. |
|  | For each Cyber Asset of an Applicable System that has no provision for disabling or restricting logical ports, verify this circumstance. |
|  | For each Cyber Asset of an Applicable System that has provision for disabling or restricting logical ports, for each enabled port range or service needed to handle dynamic ports on the Cyber Asset, verify the port range or service has a documented need. |
|  | For each Cyber Asset of an Applicable System that has provision for disabling or restricting logical ports, for each enabled logical network accessible port on the Cyber Asset, verify  the logical network accessible port has a documented need. |

| **CIP-007-5 Table R1– Ports and Services** | | | |
| --- | --- | --- | --- |
| **Part** | **Applicable Systems** | **Requirements** | **Measures** |
| 1.2 | High Impact BES Cyber Systems.  Medium Impact BES Cyber Systems at Control Centers | Protect against the use of unnecessary physical input/output ports used for network connectivity, console commands, or removable media. | An example of evidence may include, but is not limited to, documentation showing types of protection of physical input/output ports, either logically through system configuration or physically using a port lock or signage. |

**Registered Entity Response (Required):**

Describe, in narrative form, how you meet compliance with this requirement.

Registered Entity Evidence (Required):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| The following information is requested for each document submitted as evidence. Also, evidence submitted should be highlighted and bookmarked, as appropriate, to identify the exact location where evidence of compliance may be found. | | | | | |
| **File Name** | **Document Title** | **Revision or Version** | **Document Date** | **Relevant Page(s) or Section(s)** | **Description of Applicability of Document** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

Audit Team Evidence Reviewed (This section to be completed by the Compliance Monitor Administrator):

|  |
| --- |
|  |
|  |
|  |

Compliance Assessment Approach Specific to Part 1.2

***This section to be completed by the Compliance Monitor Administrator***

|  |  |
| --- | --- |
|  | Verify the Responsible Entity has documented one or more processes that protect against the use of unnecessary physical input/output ports used for network connectivity, console commands, or Removable Media. |
|  | For each Cyber Asset of an Applicable System, verify that the unnecessary physical input/output ports used for network connectivity, console commands, or Removable Media are protected against use. |

**[Compliance Summary:](#R1)**

|  |
| --- |
| Finding Summary:  Primary Documents Supporting Findings: |

**Auditor Notes:**

|  |
| --- |
|  |

R2 Supporting Evidence and Documentation

**R2.** Each Responsible Entity shall implement, in a manner that identifies, assesses, and corrects deficiencies, one or more documented processes that collectively include each of the applicable requirement parts in *CIP-007-5 Table R2 – Security Patch Management*. *[Violation Risk Factor: Medium] [Time Horizon: Operations Planning].*

**M2.** Evidence must include each of the applicable documented processes that collectively include each of the applicable requirement parts in *CIP-007-5 Table R2 – Security Patch Management* and additional evidence to demonstrate implementation as described in the Measures column of the table.

| **CIP-007-5 Table R2 – Security Patch Management** | | | |
| --- | --- | --- | --- |
| **Part** | **Applicable Systems** | **Requirements** | **Measures** |
| 2.1 | High Impact BES Cyber Systems and their associated:   1. EACMS; 2. PACS; and 3. PCA   Medium Impact BES Cyber Systems and their associated:   1. EACMS; 2. PACS; and 3. PCA | A patch management process for tracking, evaluating, and installing cyber security patches for applicable Cyber Assets. The tracking portion shall include the identification of a source or sources that the Responsible Entity tracks for the release of cyber security patches for applicable Cyber Assets that are updateable and for which a patching source exists. | An example of evidence may include, but is not limited to, documentation of a patch management process and documentation or lists of sources that are monitored, whether on an individual BES Cyber System or Cyber Asset basis. |

**Registered Entity Response (Required):**

Describe, in narrative form, how you meet compliance with this requirement.

Registered Entity Evidence (Required):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| The following information is requested for each document submitted as evidence. Also, evidence submitted should be highlighted and bookmarked, as appropriate, to identify the exact location where evidence of compliance may be found. | | | | | |
| **File Name** | **Document Title** | **Revision or Version** | **Document Date** | **Relevant Page(s) or Section(s)** | **Description of Applicability of Document** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

Audit Team Evidence Reviewed (This section to be completed by the Compliance Monitor Administrator):

|  |
| --- |
|  |
|  |
|  |

Compliance Assessment Approach Specific to Part 2.1

***This section to be completed by the Compliance Monitor Administrator***

|  |  |
| --- | --- |
|  | Verify the Responsible Entity has documented one or more patch management processes for tracking, evaluating, and installing cyber security patches for Cyber Assets of Applicable Systems. |
|  | Verify that the tracking portion of each patch management process includes the identification of a source or sources that the Responsible Entity tracks for the release of cyber security patches for Cyber Assets of Applicable Systems that are updateable and for which a patching source exists. |
|  | For each applicable Cyber Asset, verify at least one of the following is true:   * The Responsible Entity has identified one or more patching sources; * The Responsible Entity has documented that the Cyber Asset is not updateable; or * The Responsible Entity has documented that no patching source exists. |

| **CIP-007-5 Table R2 – Security Patch Management** | | | |
| --- | --- | --- | --- |
| **Part** | **Applicable Systems** | **Requirements** | **Measures** |
| 2.2 | High Impact BES Cyber Systems and their associated:   1. EACMS; 2. PACS; and 3. PCA   Medium Impact BES Cyber Systems and their associated:   1. EACMS; 2. PACS; and 3. PCA | At least once every 35 calendar days, evaluate security patches for applicability that have been released since the last evaluation from the source or sources identified in Part 2.1. | An example of evidence may include, but is not limited to, an evaluation conducted by, referenced by, or on behalf of a Responsible Entity of security-related patches released by the documented sources at least once every 35 calendar days. |

**Registered Entity Response (Required):**

Describe, in narrative form, how you meet compliance with this requirement.

Registered Entity Evidence (Required):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| The following information is requested for each document submitted as evidence. Also, evidence submitted should be highlighted and bookmarked, as appropriate, to identify the exact location where evidence of compliance may be found. | | | | | |
| **File Name** | **Document Title** | **Revision or Version** | **Document Date** | **Relevant Page(s) or Section(s)** | **Description of Applicability of Document** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

Audit Team Evidence Reviewed (This section to be completed by the Compliance Monitor Administrator):

|  |
| --- |
|  |
|  |
|  |

Compliance Assessment Approach Specific to Part 2.2

***This section to be completed by the Compliance Monitor Administrator***

|  |  |
| --- | --- |
|  | Verify the Responsible Entity has documented one or more processes to evaluate security patches for applicability that have been released since the last evaluation from the source or sources identified in Part 2.1, at least once every 35 calendar days. |
|  | For each identified patch source, verify that security patches have been evaluated for applicability at least once every 35 calendar days. |
|  | For each identified patch source, verify the results of the evaluations for applicability. |

| **CIP-007-5 Table R2 – Security Patch Management** | | | |
| --- | --- | --- | --- |
| **Part** | **Applicable Systems** | **Requirements** | **Measures** |
| 2.3 | High Impact BES Cyber Systems and their associated:   1. EACMS; 2. PACS; and 3. PCA   Medium Impact BES Cyber Systems and their associated:   1. EACMS; 2. PACS; and 3. PCA | For applicable patches identified in Part 2.2, within 35 calendar days of the evaluation completion, take one of the following actions:   * Apply the applicable patches; or * Create a dated mitigation plan; or * Revise an existing mitigation plan.   Mitigation plans shall include the Responsible Entity’s planned actions to mitigate the vulnerabilities addressed by each security patch and a timeframe to complete these mitigations. | Examples of evidence may include, but are not limited to:   * Records of the installation of the patch (e.g., exports from automated patch management tools that provide installation date, verification of BES Cyber System Component software revision, or registry exports that show software has been installed); or * A dated plan showing when and how the vulnerability will be addressed, to include documentation of the actions to be taken by the Responsible Entity to mitigate the vulnerabilities addressed by the security patch and a timeframe for the completion of these mitigations. |

**Registered Entity Response (Required):**

Describe, in narrative form, how you meet compliance with this requirement.

Registered Entity Evidence (Required):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| The following information is requested for each document submitted as evidence. Also, evidence submitted should be highlighted and bookmarked, as appropriate, to identify the exact location where evidence of compliance may be found. | | | | | |
| **File Name** | **Document Title** | **Revision or Version** | **Document Date** | **Relevant Page(s) or Section(s)** | **Description of Applicability of Document** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

Audit Team Evidence Reviewed (This section to be completed by the Compliance Monitor Administrator):

|  |
| --- |
|  |
|  |
|  |

Compliance Assessment Approach Specific to Part 2.3

***This section to be completed by the Compliance Monitor Administrator***

|  |  |
| --- | --- |
|  | Verify the Responsible Entity has documented one or more processes, for applicable patches identified in Part 2.2, to take one of the following actions within 35 calendar days of the evaluation completion:   * Apply the applicable patches; * Create a dated mitigation plan; or * Revise an existing mitigation plan. |
|  | Verify the Responsible Entity has documented one or more processes for its mitigation plans that requires the inclusion of planned actions to mitigate the vulnerabilities addressed by each security patch and a timeframe to complete these mitigations. |
|  | For each applicable security patch, verify that one of the following actions was taken within 35 calendar days of the completion of the evaluation for applicability:   * The patch was applied to all devices for which it is applicable; * A mitigation plan was created; or * A mitigation plan was revised. |
|  | In the case where a mitigation plan was created or revised, verify the mitigation plan includes planned actions to mitigate the vulnerabilities addressed by each security patch, and that the mitigation plan includes a timeframe for completion. |
| **Note to Auditor:**  Entities may choose to use a single mitigation plan for multiple patches. In this case, the mitigation plan must have planned actions to mitigate the vulnerabilities addressed by each security patch. | |

| **CIP-007-5 Table R2 – Security Patch Management** | | | |
| --- | --- | --- | --- |
| **Part** | **Applicable Systems** | **Requirements** | **Measures** |
| 2.4 | High Impact BES Cyber Systems and their associated:   1. EACMS; 2. PACS; and 3. PCA   Medium Impact BES Cyber Systems and their associated:   1. EACMS; 2. PACS; and 3. PCA | For each mitigation plan created or revised in Part 2.3, implement the plan within the timeframe specified in the plan, unless a revision to the plan or an extension to the timeframe specified in Part 2.3 is approved by the CIP Senior Manager or delegate. | An example of evidence may include, but is not limited to, records of implementation of mitigations. |

**Registered Entity Response (Required):**

Describe, in narrative form, how you meet compliance with this requirement.

Registered Entity Evidence (Required):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| The following information is requested for each document submitted as evidence. Also, evidence submitted should be highlighted and bookmarked, as appropriate, to identify the exact location where evidence of compliance may be found. | | | | | |
| **File Name** | **Document Title** | **Revision or Version** | **Document Date** | **Relevant Page(s) or Section(s)** | **Description of Applicability of Document** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

Audit Team Evidence Reviewed (This section to be completed by the Compliance Monitor Administrator):

|  |
| --- |
|  |
|  |
|  |

Compliance Assessment Approach Specific to Part 2.4

***This section to be completed by the Compliance Monitor Administrator***

|  |  |
| --- | --- |
|  | Verify the Responsible Entity has documented one or more processes that, for each mitigation plan created or revised in Part 2.3, require implementation of the plan within the timeframe specified in the plan, unless a revision to the plan or an extension to the timeframe specified in Part 2.3 is approved by the CIP Senior Manager or delegate. |
|  | For each completed mitigation plan:   1. Verify the mitigation plan was completed by implementing all provisions of the mitigation plan; 2. Verify the mitigation plan was completed within the specified timeframe; and 3. If a revision or an extension was made to a mitigation plan, verify the revision or extension was approved by the CIP Senior Manager or delegate. |
|  | For each active mitigation plan:   1. Verify the mitigation plan has not exceeded its implementation timeframe, or its approved extension, if any. 2. If a revision or an extension was made to a mitigation plan, verify the revision or extension was approved by the CIP Senior Manager or delegate. |

**[Compliance Summary:](#R2)**

|  |
| --- |
| Finding Summary:  Primary Documents Supporting Findings: |

**Auditor Notes:**

|  |
| --- |
|  |

R3 Supporting Evidence and Documentation

**R3.** Each Responsible Entity shall implement, in a manner that identifies, assesses, and corrects deficiencies, one or more documented processes that collectively include each of the applicable requirement parts in *CIP-007-5 Table R3 – Malicious Code Prevention*. *[Violation Risk Factor: Medium] [Time Horizon: Same Day Operations].*

**M3.** Evidence must include each of the documented processes that collectively include each of the applicable requirement parts in *CIP-007-5 Table R3 – Malicious Code Prevention* and additional evidence to demonstrate implementation as described in the Measures column of the table.

| **CIP-007-5 Table R3 – Malicious Code Prevention** | | | |
| --- | --- | --- | --- |
| **Part** | **Applicable Systems** | **Requirements** | **Measures** |
| 3.1 | High Impact BES Cyber Systems and their associated:   1. EACMS; 2. PACS; and 3. PCA   Medium Impact BES Cyber Systems and their associated:   1. EACMS; 2. PACS; and 3. PCA | Deploy method(s) to deter, detect, or prevent malicious code. | An example of evidence may include, but is not limited to, records of the Responsible Entity’s performance of these processes (e.g., through traditional antivirus, system hardening, policies, etc.). |

**Registered Entity Response (Required):**

Describe, in narrative form, how you meet compliance with this requirement.

Registered Entity Evidence (Required):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| The following information is requested for each document submitted as evidence. Also, evidence submitted should be highlighted and bookmarked, as appropriate, to identify the exact location where evidence of compliance may be found. | | | | | |
| **File Name** | **Document Title** | **Revision or Version** | **Document Date** | **Relevant Page(s) or Section(s)** | **Description of Applicability of Document** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

Audit Team Evidence Reviewed (This section to be completed by the Compliance Monitor Administrator):

|  |
| --- |
|  |
|  |
|  |

Compliance Assessment Approach Specific to Part 3.1

***This section to be completed by the Compliance Monitor Administrator***

|  |  |
| --- | --- |
|  | Verify the Responsible Entity has documented one or more processes to deploy method(s) to deter, detect, or prevent malicious code. |
|  | Verify that each Applicable System has one or more documented methods deployed to deter, detect, or prevent malicious code. |

| **CIP-007-5 Table R3 – Malicious Code Prevention** | | | |
| --- | --- | --- | --- |
| **Part** | **Applicable Systems** | **Requirements** | **Measures** |
| 3.2 | High Impact BES Cyber Systems and their associated:   1. EACMS; 2. PACS; and 3. PCA   Medium Impact BES Cyber Systems and their associated:   1. EACMS; 2. PACS; and 3. PCA | Mitigate the threat of detected malicious code. | Examples of evidence may include, but are not limited to:   * Records of response processes for malicious code detection * Records of the performance of these processes when malicious code is detected. |

**Registered Entity Response (Required):**

Describe, in narrative form, how you meet compliance with this requirement.

Registered Entity Evidence (Required):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| The following information is requested for each document submitted as evidence. Also, evidence submitted should be highlighted and bookmarked, as appropriate, to identify the exact location where evidence of compliance may be found. | | | | | |
| **File Name** | **Document Title** | **Revision or Version** | **Document Date** | **Relevant Page(s) or Section(s)** | **Description of Applicability of Document** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

Audit Team Evidence Reviewed (This section to be completed by the Compliance Monitor Administrator):

|  |
| --- |
|  |
|  |
|  |

Compliance Assessment Approach Specific to Part 3.2

***This section to be completed by the Compliance Monitor Administrator***

|  |  |
| --- | --- |
|  | Verify the Responsible Entity has documented one or more processes that mitigate the threat of detected malicious code. |
|  | For each instance of detected malicious code, verify the threat of the malicious code was mitigated. |
| **Note to Auditor:**  It may not be necessary to remove malicious code from a device in order to mitigate the threat of that malicious code. For example, it may be possible to contain malicious code by blocking communication with its command and control servers and by preventing its spread to other systems. Then the malicious code can be removed at a later time such as a plant outage. | |

| **CIP-007-5 Table R3 – Malicious Code Prevention** | | | |
| --- | --- | --- | --- |
| **Part** | **Applicable Systems** | **Requirements** | **Measures** |
| 3.3 | High Impact BES Cyber Systems and their associated:   1. EACMS; 2. PACS; and 3. PCA   Medium Impact BES Cyber Systems and their associated:   1. EACMS; 2. PACS; and 3. PCA | For those methods identified in Part 3.1 that use signatures or patterns, have a process for the update of the signatures or patterns. The process must address testing and installing the signatures or patterns. | An example of evidence may include, but is not limited to, documentation showing the process used for the update of signatures or patterns. |

**Registered Entity Response (Required):**

Describe, in narrative form, how you meet compliance with this requirement.

Registered Entity Evidence (Required):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| The following information is requested for each document submitted as evidence. Also, evidence submitted should be highlighted and bookmarked, as appropriate, to identify the exact location where evidence of compliance may be found. | | | | | |
| **File Name** | **Document Title** | **Revision or Version** | **Document Date** | **Relevant Page(s) or Section(s)** | **Description of Applicability of Document** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

Audit Team Evidence Reviewed (This section to be completed by the Compliance Monitor Administrator):

|  |
| --- |
|  |
|  |
|  |

Compliance Assessment Approach Specific to Part 3.3

***This section to be completed by the Compliance Monitor Administrator***

|  |  |
| --- | --- |
|  | For those methods identified in Part 3.1 that use signatures or patterns, verify the Responsible Entity has documented one or more processes to update the signatures or patterns. The process must address testing and installing the signatures or patterns. |
|  | For each method deployed to deter, detect, or prevent malicious code that uses signatures or patterns, verify the associated process addresses testing and installing updates to signatures or patterns. |
|  | For each method deployed to deter, detect, or prevent malicious code that uses signatures or patterns, verify the associated process is implemented. |

**[Compliance Summary:](#R3)**

|  |
| --- |
| Finding Summary:  Primary Documents Supporting Findings: |

**Auditor Notes:**

|  |
| --- |
|  |

R4 Supporting Evidence and Documentation

**R4.** Each Responsible Entity shall implement, in a manner that identifies, assesses, and corrects deficiencies, one or more documented processes that collectively include each of the applicable requirement parts in *CIP-007-5 Table R4 – Security Event Monitoring*. *[Violation Risk Factor: Medium] [Time Horizon: Same Day Operations and Operations Assessment.]*

**M4.** Evidence must include each of the documented processes that collectively include each of the applicable requirement parts in *CIP-007-5 Table R4 – Security Event Monitoring* and additional evidence to demonstrate implementation as described in the Measures column of the table.

| **CIP-007-5 Table R4 – Security Event Monitoring** | | | |
| --- | --- | --- | --- |
| **Part** | **Applicable Systems** | **Requirements** | **Measures** |
| 4.1 | High Impact BES Cyber Systems and their associated:   1. EACMS; 2. PACS; and 3. PCA   Medium Impact BES Cyber Systems and their associated:   1. EACMS; 2. PACS; and 3. PCA | Log events at the BES Cyber System level (per BES Cyber System capability) or at the Cyber Asset level (per Cyber Asset capability) for identification of, and after-the-fact investigations of, Cyber Security Incidents that includes, as a minimum, each of the following types of events:   1. Detected successful login attempts; 2. Detected failed access attempts and failed login attempts; 3. Detected malicious code. | Examples of evidence may include, but are not limited to, a paper or system generated listing of event types for which the BES Cyber System is capable of detecting and, for generated events, is configured to log. This listing must include the required types of events. |

**Registered Entity Response (Required):**

Describe, in narrative form, how you meet compliance with this requirement.

Registered Entity Evidence (Required):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| The following information is requested for each document submitted as evidence. Also, evidence submitted should be highlighted and bookmarked, as appropriate, to identify the exact location where evidence of compliance may be found. | | | | | |
| **File Name** | **Document Title** | **Revision or Version** | **Document Date** | **Relevant Page(s) or Section(s)** | **Description of Applicability of Document** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

Audit Team Evidence Reviewed (This section to be completed by the Compliance Monitor Administrator):

|  |
| --- |
|  |
|  |
|  |

Compliance Assessment Approach Specific to Part 4.1

***This section to be completed by the Compliance Monitor Administrator***

|  |  |
| --- | --- |
|  | Verify the Responsible Entity has documented one or more processes to log events at the BES Cyber System level (per BES Cyber System capability) or at the Cyber Asset level (per Cyber Asset capability) for identification of, and after-the-fact investigations of, Cyber Security Incidents that includes, as a minimum, each of the following types of events:   1. Detected successful login attempts; 2. detected failed access attempts and failed login attempts; and 3. detected malicious code. |
|  | For each event type required for identification of or after the fact investigation of Cyber Security Incidents:   * If logging of the event type is performed at the BES Cyber System level, for each Applicable System, verify:   + The BES Cyber System is capable of, and configured for, logging the event type;   + The BES Cyber System is generating logs of the event type; or   + The BES Cyber System is not capable of logging the event type. * If logging of the event type is performed at the Cyber Asset level, for each Cyber Asset of an Applicable System, verify:   + The Cyber Asset is capable of, and configured for, logging the event type;   + The Cyber Asset is generating logs of the event type; or   + The Cyber Asset is not capable of logging the event type. |

| **CIP-007-5 Table R4 – Security Event Monitoring** | | | |
| --- | --- | --- | --- |
| **Part** | **Applicable Systems** | **Requirements** | **Measures** |
| 4.2 | High Impact BES Cyber Systems and their associated:   1. EACMS; 2. PACS; and 3. PCA   Medium Impact BES Cyber Systems with External Routable Connectivity and their associated:   1. EACMS; 2. PACS; and 3. PCA | Generate alerts for security events that the Responsible Entity determines necessitates an alert, that includes, as a minimum, each of the following types of events (per Cyber Asset or BES Cyber System capability):   1. Detected malicious code from Part 4.1; and 2. Detected failure of Part 4.1 event logging. | Examples of evidence may include, but are not limited to, paper or system-generated listing of security events that the Responsible Entity determined necessitate alerts, including paper or system generated list showing how alerts are configured. |

**Registered Entity Response (Required):**

Describe, in narrative form, how you meet compliance with this requirement.

Registered Entity Evidence (Required):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| The following information is requested for each document submitted as evidence. Also, evidence submitted should be highlighted and bookmarked, as appropriate, to identify the exact location where evidence of compliance may be found. | | | | | |
| **File Name** | **Document Title** | **Revision or Version** | **Document Date** | **Relevant Page(s) or Section(s)** | **Description of Applicability of Document** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

Audit Team Evidence Reviewed (This section to be completed by the Compliance Monitor Administrator):

|  |
| --- |
|  |
|  |
|  |

Compliance Assessment Approach Specific to Part 4.2

***This section to be completed by the Compliance Monitor Administrator***

|  |  |
| --- | --- |
|  | Verify the Responsible Entity has documented one or more processes to generate alerts for security events that the Responsible Entity determines necessitates an alert, that includes, as a minimum, each of the following types of events (per Cyber Asset or BES Cyber System capability):   1. Detected malicious code from Part 4.1; and 2. detected failure of Part 4.1 event logging. |
|  | Verify the Responsible Entity has determined the security events that necessitate an alert. |
|  | Verify the security events determined to necessitate an alert include, at a minimum:   1. Detected malicious code; and 2. detected failure of logging. |
|  | For each of the security events determined to necessitate an alert:   1. If alerting is performed on a per Cyber Asset basis, is the Cyber Asset capable of alerting on the event type?    1. If yes, verify either:       1. Alerting is configured for the Cyber Asset for the event type; or       2. an actual alert has been generated.    2. If no, verify the inability of the Cyber Asset to generate an alert for the event type. 2. If alerting is performed on a per BES Cyber System basis, is the BES Cyber System capable of alerting on the event type?    1. If yes, verify either:       1. Alerting is configured for the BES Cyber System for the event type; or       2. an actual alert has been generated.    2. If no, verify the inability of the BES Cyber System to generate an alert for the event type. |

| **CIP-007-5 Table R4 – Security Event Monitoring** | | | |
| --- | --- | --- | --- |
| **Part** | **Applicable Systems** | **Requirements** | **Measures** |
| 4.3 | High Impact BES Cyber Systems and their associated:   1. EACMS; 2. PACS; and 3. PCA   Medium Impact BES Cyber Systems at Control Centers and their associated:   1. EACMS; 2. PACS; and 3. PCA | Where technically feasible, retain applicable event logs identified in Part 4.1 for at least the last 90 consecutive calendar days except under CIP Exceptional Circumstances. | Examples of evidence may include, but are not limited to, documentation of the event log retention process and paper or system generated reports showing log retention configuration set at 90 days or greater. |

**Registered Entity Response (Required):**

Describe, in narrative form, how you meet compliance with this requirement.

Registered Entity Evidence (Required):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| The following information is requested for each document submitted as evidence. Also, evidence submitted should be highlighted and bookmarked, as appropriate, to identify the exact location where evidence of compliance may be found. | | | | | |
| **File Name** | **Document Title** | **Revision or Version** | **Document Date** | **Relevant Page(s) or Section(s)** | **Description of Applicability of Document** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

Audit Team Evidence Reviewed (This section to be completed by the Compliance Monitor Administrator):

|  |
| --- |
|  |
|  |
|  |

Compliance Assessment Approach Specific to Part 4.3

***This section to be completed by the Compliance Monitor Administrator***

|  |  |
| --- | --- |
|  | Verify the Responsible Entity has documented one or more processes to retain applicable event logs identified in Part 4.1 for at least the last 90 consecutive calendar days, where technically feasible, except under CIP Exceptional Circumstances. |
|  | For each Applicable System, verify logs are retained for at least 90 consecutive calendar days unless  a documented CIP Exceptional Circumstance exists. |
|  | If the Responsible Entity has experienced an exception for CIP Exceptional Circumstances, verify the Responsible Entity has adhered to any applicable cyber security policies. |
| **Note to Auditor:**  The Responsible Entity may reference a separate set of documents to demonstrate its response to any requirements impacted by CIP Exceptional Circumstances. | |

| **CIP-007-5 Table R4 – Security Event Monitoring** | | | |
| --- | --- | --- | --- |
| **Part** | **Applicable Systems** | **Requirements** | **Measures** |
| 4.4 | High Impact BES Cyber Systems and their associated:   1. EACMS; and 2. PCA | Review a summarization or sampling of logged events as determined by the Responsible Entity at intervals no greater than 15 calendar days to identify undetected Cyber Security Incidents. | Examples of evidence may include, but are not limited to, documentation describing the review, any findings from the review (if any), and dated documentation showing the review occurred. |

**Registered Entity Response (Required):**

Describe, in narrative form, how you meet compliance with this requirement.

Registered Entity Evidence (Required):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| The following information is requested for each document submitted as evidence. Also, evidence submitted should be highlighted and bookmarked, as appropriate, to identify the exact location where evidence of compliance may be found. | | | | | |
| **File Name** | **Document Title** | **Revision or Version** | **Document Date** | **Relevant Page(s) or Section(s)** | **Description of Applicability of Document** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

Audit Team Evidence Reviewed (This section to be completed by the Compliance Monitor Administrator):

|  |
| --- |
|  |
|  |
|  |

Compliance Assessment Approach Specific to Part 4.4

***This section to be completed by the Compliance Monitor Administrator***

|  |  |
| --- | --- |
|  | Verify the Responsible Entity has documented one or more processes to review a summarization or sampling of logged events as determined by the Responsible Entity at intervals no greater than 15 calendar days to identify undetected Cyber Security Incidents. |
|  | Verify the Responsible Entity reviews a summary or sampling of logged events at least every 15 calendar days to identify otherwise undetected Cyber Security Incidents. |

**[Compliance Summary:](#R4)**

|  |
| --- |
| Finding Summary:  Primary Documents Supporting Findings: |

**Auditor Notes:**

|  |
| --- |
|  |

R5 Supporting Evidence and Documentation

**R5.** Each Responsible Entity shall implement, in a manner that identifies, assesses, and corrects deficiencies, one or more documented processes that collectively include each of the applicable requirement parts in *CIP-007-5 Table R5 – System Access Controls*. *[Violation Risk Factor: Medium] [Time Horizon: Operations Planning].*

**M5.** Evidence must include each of the applicable documented processes that collectively include each of the applicable requirement parts in *CIP-007-5 Table 5 – System Access Controls* and additional evidence to demonstrate implementation as described in the Measures column of the table.

| **CIP-007-5 Table R5 – System Access Control** | | | |
| --- | --- | --- | --- |
| **Part** | **Applicable Systems** | **Requirements** | **Measures** |
| 5.1 | High Impact BES Cyber Systems and their associated:   1. EACMS; 2. PACS; and 3. PCA   Medium Impact BES Cyber Systems at Control Centers and their associated:   1. EACMS; 2. PACS; and 3. PCA   Medium Impact BES Cyber Systems with External Routable Connectivity and their associated:   1. EACMS; 2. PACS; and 3. PCA | Have a method(s) to enforce authentication of interactive user access, where technically feasible. | An example of evidence may include, but is not limited to, documentation describing how access is authenticated. |

**Registered Entity Response (Required):**

Describe, in narrative form, how you meet compliance with this requirement.

Registered Entity Evidence (Required):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| The following information is requested for each document submitted as evidence. Also, evidence submitted should be highlighted and bookmarked, as appropriate, to identify the exact location where evidence of compliance may be found. | | | | | |
| **File Name** | **Document Title** | **Revision or Version** | **Document Date** | **Relevant Page(s) or Section(s)** | **Description of Applicability of Document** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

Audit Team Evidence Reviewed (This section to be completed by the Compliance Monitor Administrator):

|  |
| --- |
|  |
|  |
|  |

Compliance Assessment Approach Specific to Part 5.1

***This section to be completed by the Compliance Monitor Administrator***

|  |  |
| --- | --- |
|  | Verify the Responsible Entity has documented one or more processes to have a method(s) to enforce authentication of interactive user access, where technically feasible. |
|  | For each Applicable System, verify the Responsible Entity enforces authentication of interactive user access. |

| **CIP-007-5 Table R5 – System Access Control** | | | |
| --- | --- | --- | --- |
| **Part** | **Applicable Systems** | **Requirements** | **Measures** |
| 5.2 | High Impact BES Cyber Systems and their associated:   1. EACMS; 2. PACS; and 3. PCA   Medium Impact BES Cyber Systems and their associated:   1. EACMS; 2. PACS; and 3. PCA | Identify and inventory all known enabled default or other generic account types, either by system, by groups of systems, by location, or by system type(s). | An example of evidence may include, but is not limited to, a listing of accounts by account types showing the enabled or generic account types in use for the BES Cyber System. |

**Registered Entity Response (Required):**

Describe, in narrative form, how you meet compliance with this requirement.

Registered Entity Evidence (Required):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| The following information is requested for each document submitted as evidence. Also, evidence submitted should be highlighted and bookmarked, as appropriate, to identify the exact location where evidence of compliance may be found. | | | | | |
| **File Name** | **Document Title** | **Revision or Version** | **Document Date** | **Relevant Page(s) or Section(s)** | **Description of Applicability of Document** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

Audit Team Evidence Reviewed (This section to be completed by the Compliance Monitor Administrator):

|  |
| --- |
|  |
|  |
|  |

Compliance Assessment Approach Specific to Part 5.2

***This section to be completed by the Compliance Monitor Administrator***

|  |  |
| --- | --- |
|  | Verify the Responsible Entity has documented one or more processes to identify and inventory all known enabled default or other generic account types, either by system, by groups of systems, by location, or by system type(s). |
|  | For each Cyber Asset of an Applicable System, verify the Responsible Entity has identified and inventoried all known enabled default or other generic account types. These account types may be identified by system, by groups of systems, by location, or by system type. |

| **CIP-007-5 Table R5 – System Access Control** | | | |
| --- | --- | --- | --- |
| **Part** | **Applicable Systems** | **Requirements** | **Measures** |
| 5.3 | High Impact BES Cyber Systems and their associated:   1. EACMS; 2. PACS; and 3. PCA   Medium Impact BES Cyber Systems with External Routable Connectivity and their associated:   1. EACMS; 2. PACS; and 3. PCA | Identify individuals who have authorized access to shared accounts. | An example of evidence may include, but is not limited to, listing of shared accounts and the individuals who have authorized access to each shared account. |

**Registered Entity Response (Required):**

Describe, in narrative form, how you meet compliance with this requirement.

Registered Entity Evidence (Required):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| The following information is requested for each document submitted as evidence. Also, evidence submitted should be highlighted and bookmarked, as appropriate, to identify the exact location where evidence of compliance may be found. | | | | | |
| **File Name** | **Document Title** | **Revision or Version** | **Document Date** | **Relevant Page(s) or Section(s)** | **Description of Applicability of Document** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

Audit Team Evidence Reviewed (This section to be completed by the Compliance Monitor Administrator):

|  |
| --- |
|  |
|  |
|  |

Compliance Assessment Approach Specific to Part 5.3

***This section to be completed by the Compliance Monitor Administrator***

|  |  |
| --- | --- |
|  | Verify the Responsible Entity has documented one or more processes to identify individuals who have authorized access to shared accounts. |
|  | For each Cyber Asset of an Applicable System, verify the Responsible Entity has identified individuals with authorized access to shared accounts. |
| **Note to Auditor:**  The Responsible Entity is permitted flexibility in the way shared accounts may be documented. Shared accounts may be documented by Cyber Asset or BES Cyber System. Additionally, individuals with authorized access to shared accounts may be listed individually or by role. | |

| **CIP-007-5 Table R5 – System Access Control** | | | |
| --- | --- | --- | --- |
| **Part** | **Applicable Systems** | **Requirements** | **Measures** |
| 5.4 | High Impact BES Cyber Systems and their associated:   1. EACMS; 2. PACS; and 3. PCA   Medium Impact BES Cyber Systems and their associated:   1. EACMS; 2. PACS; and 3. PCA | Change known default passwords, per Cyber Asset capability | Examples of evidence may include, but are not limited to:   * Records of a procedure that passwords are changed when new devices are in production; or * Documentation in system manuals or other vendor documents showing default vendor passwords were generated pseudo-randomly and are thereby unique to the device. |

**Registered Entity Response (Required):**

Describe, in narrative form, how you meet compliance with this requirement.

Registered Entity Evidence (Required):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| The following information is requested for each document submitted as evidence. Also, evidence submitted should be highlighted and bookmarked, as appropriate, to identify the exact location where evidence of compliance may be found. | | | | | |
| **File Name** | **Document Title** | **Revision or Version** | **Document Date** | **Relevant Page(s) or Section(s)** | **Description of Applicability of Document** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

Audit Team Evidence Reviewed (This section to be completed by the Compliance Monitor Administrator):

|  |
| --- |
|  |
|  |
|  |

Compliance Assessment Approach Specific to Part 5.4

***This section to be completed by the Compliance Monitor Administrator***

|  |  |
| --- | --- |
|  | Verify the Responsible Entity has documented one or more processes to change known default passwords, per Cyber Asset capability. |
|  | For Cyber Assets of Applicable Systems with the capability to change default passwords, verify the Responsible Entity has changed the known default passwords. |
|  | For Cyber Assets of Applicable Systems that do not have the capability to change default passwords, verify the incapability to do so. |

| **CIP-007-5 Table R5 – System Access Control** | | | |
| --- | --- | --- | --- |
| **Part** | **Applicable Systems** | **Requirements** | **Measures** |
| 5.5 | High Impact BES Cyber Systems and their associated:   1. EACMS; 2. PACS; and 3. PCA   Medium Impact BES Cyber Systems and their associated:   1. EACMS; 2. PACS; and 3. PCA | For password-only authentication for interactive user access, either technically or procedurally enforce the following password parameters:   1. Password length that is, at least, the lesser of eight characters or the maximum length supported by the Cyber Asset; and 2. Minimum password complexity that is the lesser of three or more different types of characters (e.g., uppercase alphabetic, lowercase alphabetic, numeric, non-alphanumeric) or the maximum complexity supported by the Cyber Asset. | Examples of evidence may include, but are not limited to:   * System-generated reports or screen-shots of the system-enforced password parameters, including length and complexity; or * Attestations that include a reference to the documented procedures that were followed. |

**Registered Entity Response (Required):**

Describe, in narrative form, how you meet compliance with this requirement.

Registered Entity Evidence (Required):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| The following information is requested for each document submitted as evidence. Also, evidence submitted should be highlighted and bookmarked, as appropriate, to identify the exact location where evidence of compliance may be found. | | | | | |
| **File Name** | **Document Title** | **Revision or Version** | **Document Date** | **Relevant Page(s) or Section(s)** | **Description of Applicability of Document** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

Audit Team Evidence Reviewed (This section to be completed by the Compliance Monitor Administrator):

|  |
| --- |
|  |
|  |
|  |

Compliance Assessment Approach Specific to Part 5.5

***This section to be completed by the Compliance Monitor Administrator***

|  |  |
| --- | --- |
|  | For password-only authentication for interactive user access, verify the Responsible Entity has documented one or more processes to either technically or procedurally enforce the following password parameters:   1. Password length that is, at least, the lesser of eight characters or the maximum length supported by the Cyber Asset; and 2. minimum password complexity that is the lesser of three or more different types of characters (e.g., uppercase alphabetic, lowercase alphabetic, numeric, non-alphanumeric) or the maximum complexity supported by the Cyber Asset. |
|  | For each Cyber Asset of Applicable Systems, for password-only authentication for interactive user access, verify password length is enforced by either technical or procedural methods, per 5.5.1. |
|  | For each Cyber Asset of Applicable Systems, for password-only authentication for interactive user access, verify password complexity is enforced by either technical or procedural methods, per 5.5.2. |
| **Note to Auditor:**  This Part does not apply to multi-factor authentication. | |

| **CIP-007-5 Table R5 – System Access Control** | | | |
| --- | --- | --- | --- |
| **Part** | **Applicable Systems** | **Requirements** | **Measures** |
| 5.6 | High Impact BES Cyber Systems and their associated:   1. EACMS; 2. PACS; and 3. PCA   Medium Impact BES Cyber Systems with External Routable Connectivity and their associated:   1. EACMS; 2. PACS; and 3. PCA | Where technically feasible, for password-only authentication for interactive user access, either technically or procedurally enforce password changes or an obligation to change the password at least once every 15 calendar months. | Examples of evidence may include, but are not limited to:   * System-generated reports or screen-shots of the system-enforced periodicity of changing passwords; or * Attestations that include a reference to the documented procedures that were followed. |

**Registered Entity Response (Required):**

Describe, in narrative form, how you meet compliance with this requirement.

Registered Entity Evidence (Required):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| The following information is requested for each document submitted as evidence. Also, evidence submitted should be highlighted and bookmarked, as appropriate, to identify the exact location where evidence of compliance may be found. | | | | | |
| **File Name** | **Document Title** | **Revision or Version** | **Document Date** | **Relevant Page(s) or Section(s)** | **Description of Applicability of Document** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

Audit Team Evidence Reviewed (This section to be completed by the Compliance Monitor Administrator):

|  |
| --- |
|  |
|  |
|  |

Compliance Assessment Approach Specific to Part 5.6

***This section to be completed by the Compliance Monitor Administrator***

|  |  |
| --- | --- |
|  | For password-only authentication for interactive user access, verify the Responsible Entity has documented one or more processes to either technically or procedurally enforce password changes or an obligation to change the password at least once every 15 calendar months, where technically feasible. |
|  | For Cyber Assets of Applicable Systems, if a password for password-only authentication for interactive user access can be changed, verify a password change, at least every 15 calendar months, is enforced by either technical or procedural methods. |
| **Note to Auditor:**  This Part does not apply to multi-factor authentication. | |

| **CIP-007-5 Table R5 – System Access Control** | | | |
| --- | --- | --- | --- |
| **Part** | **Applicable Systems** | **Requirements** | **Measures** |
| 5.7 | High Impact BES Cyber Systems and their associated:   1. EACMS; 2. PACS; and 3. PCA   Medium Impact BES Cyber Systems at Control Centers and their associated:   1. EACMS; 2. PACS; and 3. PCA | Where technically feasible, either:   * Limit the number of unsuccessful authentication attempts; or * Generate alerts after a threshold of unsuccessful authentication attempts. | Examples of evidence may include, but are not limited to:   * Documentation of the account-lockout parameters; or * Rules in the alerting configuration showing how the system notified individuals after a determined number of unsuccessful login attempts. |

**Registered Entity Response (Required):**

Describe, in narrative form, how you meet compliance with this requirement.

Registered Entity Evidence (Required):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| The following information is requested for each document submitted as evidence. Also, evidence submitted should be highlighted and bookmarked, as appropriate, to identify the exact location where evidence of compliance may be found. | | | | | |
| **File Name** | **Document Title** | **Revision or Version** | **Document Date** | **Relevant Page(s) or Section(s)** | **Description of Applicability of Document** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

Audit Team Evidence Reviewed (This section to be completed by the Compliance Monitor Administrator):

|  |
| --- |
|  |
|  |
|  |

Compliance Assessment Approach Specific to Part 5.7

***This section to be completed by the Compliance Monitor Administrator***

|  |  |
| --- | --- |
|  | Verify the Responsible Entity has documented one or more processes to either:   * Limit the number of unsuccessful authentication attempts, where technically feasible; or * generate alerts after a threshold of unsuccessful authentication attempts, where technically feasible. |
|  | If the number of unsuccessful authentication attempts is limited, verify the configuration. |
|  | If alerts are generated after a threshold of unsuccessful authentication attempts, verify the evidence of configuration supports this method. |

**[Compliance Summary:](#R5)**

|  |
| --- |
| Finding Summary:  Primary Documents Supporting Findings: |

**Auditor Notes:**

|  |
| --- |
|  |

**Revision History for RSAW**

|  |  |  |
| --- | --- | --- |
| **Date** | **Reviewer(s)** | **Revision Description** |
| 3/4/2016 | Jennifer Salisbury, WECC  Julie Blair, WECC  WECC CIP SME | Intial version |
|  |  |  |
|  |  |  |
|  |  |  |