

## **Request for ACIC** Message Switch Connectivity Return form to: ACIC.Operations@dps.arkansas.gov

I. Agency Information				Date Submitted:		
Agency Name:					Agency ORI:	
Agency Address:					Agency Phone:	
City:			State: AR Zip Code:			
TAC / Point(s) of Contact(First Name, Middle Initial, Last Name)			LASO (First Name, Middle Initial, Last Name)			
TAC / Point of Contact Phone Number (Direct Number):			LASO (Direct Number):			
TAC / Point of Contact Email Address:			LASO Email Address:			
II. Vendor Information						
Vendor Name:				Communication Protocol: DAC XDAC		
Vendor Address: Vendor			Phone:	Is the IP address: Public Private		
City:	State:	Zip Code	Zip Code:		If the IP address is public, please provide the IP address below. If the IP address is private, DO NOT include it on this form.	
Vendor Point(s) of Contact (First Name, Contact ACIC by phone to pr					ACIC by phone to provide priv	
Middle Initial, Last Name)     682-7435.       Vendor Point of Contact     Public IP Address:						
Phone Number (Direct Number): Vendor Point of						
Contact Email Address:						
III. Agency Questionnaire						
Type of System being installed: (select all that apply)       MDT (Mobile Data Terminal)         CAD (Computer Aided Dispatch)       RMS (Record Management System)         IRS (Incident Reporting System)       Other (explain):						
1. Have you submitted a Network Diagram to ACIC for approval that shows this additional connection?       Yes       No						
2. Does your agency have a current contract with the vendor?						Yes 🗌 No 🗌
3. If yes to question 2, does the contract state the vendor must comply with the current CJIS Security Policy?						Yes 🗌 No 🗌
4. Have fingerprint based background checks been performed on each vendor employee with access to CJI?						Yes 🗌 No 🗌
5. Security Addendums have been signed with each vendor employee with access to CJI?						Yes 🗌 No 🗌
6. Have all vendor employees taken the CJIS Security Training?						Yes No
7. Has the agency completed a Technical Security audit of the vendor?						Yes No
8. The vendor has the following policies:						
				d) Patch Management Policy Yes 🗌 No 📃		
b) Physical Protection Policy Yes No			e) User Account Management Policy			Yes No
c) Incident Response Policy Yes No f) Password Policy Yes No						
9. Will CJI data be stored outside of the agency? (Including backups.) (If No, go to question 13.) Yes 🗌 No 🗌						Yes 🗌 No 🗌
10. Will any CJI be stored in the cloud? (Including backups.) (If No to this question, go to question 14.)						Yes 🗌 No 🗌
11. If yes to question 10, is the cloud storage located in the United States or Canada?						Yes 🗌 No 🗌
12. If yes to question 10, your vendor must provide an encryption certificate for FIPS 140-2 compliance for data in transit. What is the Certificate Number?						
13. If yes to question 10, your vendor must provide an encryption certificate for FIPS 197 compliance for data at rest. What is the Certificate Number?						
14. Will the vendor have remote access to their system?						Yes 🗌 No 🗌
15. If yes to question 14, is the remote session encrypted? If yes, what is the encryption certificate number?						Yes 🗌 No 🗌
16. Will the vendor employees need Advanced Authentication tokens?						Yes 🗌 No 🗌