This checklist is intended to provide the CSA/AO with the information required to determine the minimum security requirements for final SCIF accreditation and to assist the project personnel with planning and designing the SCIF appropriately and cost efficiently. When completing this checklist, provide as much detail as possible based upon what is known at the time it is being filled out. If any information is not known, mark the question/section as unknown and provide a description in section 5 or on additional pages that are attached to the checklist when it is sent to the AO.

Notes:

- 1. This checklist is not intended to contain any classified information. Completing the checklist should not make it classified, however, consult with your AO or security office before sending a completed checklist across unclassified lines of communication.
- 2. The digital/soft copy of this checklist has a 'mouse over' feature where the user can place the mouse over a section and additional information will appear to assist in filling out the checklist.

Checklist Contents

Section 1: GENERAL

Section 2: CONSTRUCTION

Section 3: PERSONNEL SITE SECURITY

Section 4: PHYSICAL SITE SECURITY

Section 5: ADDITIONAL COMMENTS

1. GENERAL		
1.1 Organization/SCIF Owner Name		
1.2 Date Checklist Submitted		
1.2 Date Checklist Sublitted		
1.3 SCIF Identification Number (if applicable)		
1.4 Organization Subordinate to (if applicable)		
1.5 Construction Project Name/Title		
1.6 Construction Project Address Notes:		
1. If classified, write N/A. 1.7 Name(s), Position Title(s), and Contact Information of Individual(s) Completing this	Name(s):	
Checklist.	Position Title(s):	
	Email Address(s):	
	Phone Number(s):	
1.8 Expected Start Date of Construction		
1.9 Expected End Date of Construction		
1.10 Who is currently the primary security point of	Name:	
contact for the construction project (i.e. who will the AO interface with directly throughout planning and	Position Title:	
design). This is typically the SSM, however, if an SSM has not yet been identified there	Organization:	
needs to be a primary security POC until an SSM is	Email Address:	
assigned. Notes: 1. If this person changes the AO must be notified.	Phone Number:	
	Comments:	

 1.11 Will the person identified it all: Design Reviews, Construct Meetings, and Other Project Reather release of the construction of Notes: 1. A security representative shathroughout the construction process to ensure all construction process to ensure all construction 1.11.1 If a Different Person than identified in question 1.10, identify who will represent the security requirements during these meetings. Include Name, Position, Organization, and contact information. 	on Project Planning lated Meetings prior to ontract bid package? all be included project planning action accreditation TEMPEST, etc.) are
1.12 Security In-Depth Starting Point (Mandatory Outside the US) – Will the construction project be located (check all that apply):	 On a military installation, embassy compound, USG compound or contractor compound with a dedicated U.S. person response force. Within a controlled building with separate access controls, alarms, elevator controls, stairwell control, etc. required to gain access to building or elevator. Controlled office areas adjacent to or surrounding SCIFs that are protected by alarm equipment installed in accordance with manufacturer's instructions. Fenced compounds with access-controlled vehicle gate and/or pedestrian gate. None of the above (only optional within the US) Comments:

	2. CONSTRUCTION
2.1 Construction project general description and scope of work. (Provide general description of the reason for the construction and the details of work to be performed.). Use additional pages if necessary.	Description:
2.2 Building Type – Is the construct Building or Modifying/Renova Building 2 If it is a New Building	ting an Existing Building
Building? If it is a New Building? 2.2.1 For existing buildings, what is being modified? Check all that apply.	 g, skip to question 2.3. Walls (drywall, steel/wood studs, blocks/CMU, etc.) Doors (STC rated? RFI rated? ATFP rated? etc.) Electrical (lights, power, UPS, generators, cable trays, fire alarm, mass notification system (MNS), building management system (BMS), etc.) HVAC (air duct, fan coils, chillers, thermostats, CRAC units, AHUs, VAVs, BMS, etc.) Ceiling (acoustic ceiling tiles, drywall, other, etc.) Windows (STC rated? RFI rated? ATFP rated? etc.) Floors (Raised Access Floor, carpet, tiles, hardwood, etc.) Plumbing (pipes, bathroom fixtures, fire suppression, etc.) Structural (anything load bearing, blast walls/zones, etc.) Technical Security (IDS, CCTV, Access Control, etc.) and/or TEMPEST countermeasures (RF shielding, dielectric breaks, filters, wave guides, grounding, etc.) Other (anything else to be modified not covered above)

2.2.2	Describe what is being modified in the building. Is it being removed? Added? Both? Use additional pages if necessary.	Description:		
bu	the end of construction, will ilding or will the SCIF be an ilding?		○ The entire building will be a SCIF	• The SCIF will be an area within a larger building
2.3.1	If the SCIF is an area within a larger building, what are the classification levels of the rest of the building? Check all that apply.	 SCI TS Secret Confidential Unclassified 		Junung
2.3.2	If the SCIF is an area within a larger building, will foreign nationals occupy any area of the building? If the answer is no, skip to 2.4. Notes: 1. Foreign Nationals include anyone that is not a US citizen (to include US persons).	• Yes, foreign nationals will work in this building.	○ No, foreign nationals will not work in this building.	O Unknown – Provide description of why it is unknown in section 5 of this document.

2.3.2.1 If yes to 2.3.2, describe the nationalities of all foreign nationalities expected to work in the building, if known. Use additional pages if necessary.	Description:		
 2.3.2.2 If yes to 2.3.2, can a foreign national access any area(s) immediately adjacent to the SCIF (i.e. can a foreign national touch the SCIF perimeter)? This includes all SCIF walls, floors, and ceilings. If yes, please describe. Use additional pages if necessary. 2.3.2.3 If yes to 2.3.2, does the Us owner (i.e. US Contractor) entire building, to include) have control over the	• Yes, the US government/SCIF owner has control	• No, the US government/ SCIF owner
foreign nationals?		over the building and all space within.	does not have control over the building and all space within.
2.4 What is the square footage of the SCIF?	Description:		
2.5 Will the SCIF have Compartm no, skip to 2.6.		• Yes, the SCIF will have CA.	• No, the SCIF will not have CA.
2.5.1 If yes to 2.5, has the CA C the ICD/ICS Tech. Spec.) attach a copy to this check AO. If no, complete 2.5.1.	been completed? If yes, list when sending to the	O _{Yes}	O _{No}
2.5.1.1 If no to 2.6.1, when will the CA checklist(s) be completed for submission to the AO?	Date:		
2.6 Will the SCIF contain equipm processing National Security I		O Yes	O _{No}

2.7 Has the supported command/S		O Yes	O _{No}
CTTA, through the AO, with a Checklist (Chapter 13 of the I			
review? If yes, complete 2.7.1	. .		
2.7.1 If yes to 2.7, will there be		O Yes	O _{No}
requirement?			
 2.7.2 If no to 2.7, when will the TEMPEST Checklist be completed for submission to the AO? Notes: 1. Based on CTTA recommendations, the AO may require TEMPEST countermeasures for any SCIF. 	Date:		
2.8 Construction General Contractor (GC) – Will the GC be US owned, Non-US owned (Foreign), or multiple/both?	 US Owned Non-US Owned (Foreign) (must have AO approval) Complete 2.8.1 Multiple/Both (if planning to use a different GC for different phases of construction). Complete 2.8.1 Unknown Complete 2.8.1 		
 2.8.1 Describe the situation for why the GC will not be US owned and/or why it is unknown what the GC will be. Notes: The AO must approve the GC being Non-US owned. Use additional pages if necessary. 	Description:		

2.9 Construction Subcontractors – Will the construction subcontractor(s) be US owned, Non-US owned (Foreign), or multiple/both?	 US Owned Non-US Owned (Foreign) (must have AO approval) Complete 2.9.1 Multiple/Both (if planning to use a different GC for different phases of construction). Complete 2.9.1 Unknown Complete 2.9.1
 2.9.1 Describe the situation for why the subcontractor(s) will not be US owned and/or why it is unknown what the subcontractor(s) will be. Notes: The AO must approve subcontractors being Non-US owned. Use additional pages if necessary. 2.10 Construction Labor (who 	Description:
2.10 Construction Labor (who will do the construction work) – Will the construction labor be Uncleared or Cleared? Identify specifically the categories of construction labor. Check all that apply. If using multiple categories and/or if additional information is available, complete 2.10.1.	 Uncleared (no US security clearance) US Citizens US Persons Non-US citizens/persons (must have AO approval) Local (Host) Nationals (LN) Third Country Nationals (TCN) Cleared American Worker (has US issued security clearance) Secret Cleared Top Secret Cleared Top Secret/SCI Cleared Unknown – Provide description of why it is unknown in section 5 of this document.
 2.10.1 Describe the expectations of the construction labor. Notes: 1. The AO must approve non-US citizens and/or non-US persons being used. Use additional pages if necessary. 	Description:

2.11 Are there special requi shipping, and storing of SO If yes, complete 2.11.1, 2.1 1. Projects Outside of the	Tements for procurement, CIF construction materials? 1.2, and 2.11.3. Notes: US must mark yes.	O Yes	O _{No}
2.11.1 Describe the requirements for Mate Procurement. Use additional pages if necessary.	rial Description:		
2.11.2 Describe the requirements for Mate Shipping. Use addition pages if necessary.	Tial al		

2.11.3 Describe the requirements for Material Storage. Use additional pages if necessary.	Description:
2.12 What are the expected hours of operation for the construction site (the hours the construction site will be open for construction work to progress)?	 24 hours a day Less than 24 hours a day List the hours of operation here Unknown When will the hours be identified?
2.13 What are the days of the week the construction site will be open (the days the construction site will be open for construction work to progress)?	 7 days a week Less than days a week List the days of operation here Unknown When will the days be identified?

3. PERSONNEL SITE SECURITY				
3.1 Has a Site Security Manager (S		O Yes	O _{No}	
If yes, complete 3.1.1. If no, co				
3.1.1 If yes to 3.1, identify the SSM and provide contact information.	Name: Organization/Company	<i>י</i> :		
	Email Address:			
	Phone Number:			
3.1.2 If no to 3.1, identify the source that will provide	O US Government Supplying Organiz	zation		
the SSM. Notes: 1. To avoid potential conflicts of interest, the SSM shall not be	O US Military Supplying Organization			
contracted under the Construction General Contractor (GC).	O US Contractor Expected Contract Start Date			
 3.2 Will Construction Surveillance used? If yes, complete 3.2.1 an 1. Outside of the US – The use 2. Within the US – The use o when directed by the AO or 	d 3.2.2. Notes: se of CSTs is required. f CSTs is required	O _{Yes}	O _{No}	
3.2.1 If yes to 3.2, identify the source that will provide the CSTs. Notes:	O US Government Supplying Organiz	zation		
1. To avoid potential conflicts of interest, CSTs shall not be	O US Military Supplying Organiz	zation		
contracted under the Construction General Contractor (GC).	O US Contractor Expected Contract	Start Date		
3.2.2 If yes to 3.2, what is the approximated number of CSTs needed at peak requirements and what is the minimum clearance requirement for the CSTs?	Approximated numbers Clearance requirements	er of CSTs:		

3.3 Will Cleared American Guards yes, complete 3.3.1 and 3.3.2.	(CAG) be used? If	O Yes	O _{No}
 3.3.1 If yes to 3.3, identify the source that will provide the CAGs. Notes: 1. To avoid potential conflicts of interest, the CAGs shall not be contracted under the Construction General Contractor (GC). 	 US Military Supplying Organiz US Contractor 	ation	
3.3.2 If yes to 3.3, what is the approximated number of CAGs needed at peak requirements and what is the minimum clearance requirement for the CAGs?	Approximated number		
 3.4 Outside of the US – Will non-control non-US guards be used? If yes, 1. The use of non-cleared US guards must be approved b guards must be supervised cleared US citizen. 	complete 3.4.1. Notes: guards or non-US y the AO and these	O Yes	O _{No}
3.4.1 If yes to 3.4, describe the expected use of non- cleared US guards or non-US guards. Use additional pages if necessary.	Description:		
 3.5 Will Cleared Escorts (CE) be u 3.5.1 and 3.5.2. Notes: 1. A CE is not a CST and sha without proper training/cer and experience required to 	ll not replace a CST tification, knowledge,	O Yes	O _{No}

 3.5.1 If yes to 3.5, identify the source that will provide the CEs. 3.5.2 If yes to 3.5, what is the 	 US Government Supplying Organization		
approximated number of CEs needed at peak requirements and what is the minimum clearance requirement for the CEs?	Clearance requirement		
 3.6 Has a cost estimate been completed for Personnel Security (SSM, CSTs, CAGs, and/or CEs) requirements? If no, complete 3.6.1. Notes: 1. N/A is intended for industry/commercial SCIF owners who may not need to complete a cost estimate. 	O Yes	O _{No}	N/A – Provide description of why it is unknown in section 5 of this document.
3.6.1 If no to 3.6, when will the cost estimate be completed?	Date:		
 3.7 Has a funding source been identified for Personnel Security requirements? If no, complete 3.7.1. Notes: 1. N/A is intended for industry/commercial SCIF owners who may not need to identify a funding source. 	O Yes	O _{No}	○ N/A – Provide description of why it is unknown in section 5 of this document.
3.7.1 If no to 3.7, when will the personnel security funding source be identified?	Date:		

4. PHYSICAL SITE SECURITY				
	l the construction project h	ave a perimeter fence?	O Yes	O _{No}
	es, complete 4.1.1.			
	If yes to 4.1, describe the fence type. Permanent, temporary, federally rated, etc. Use additional pages if necessary.	Description:		
Are Not	l the construction project h a (SSA)? If yes, complete es: Projects Outside of the US	4.2.1, 4.2.2, and 4.2.3.	O Yes	O _{No}
4.2.1	If yes to 4.2, describe the SSA, to include type of area/facility/container and location. Use additional pages if necessary.	Description:		
	If yes to 4.2, describe how the SSA will be secured during hours of non-operation. 24/7 CAGs, IDS, CCTV, locks, fence, etc. Use additional pages if necessary.	Description:		

4.2.3	If yes to 4.2, will the SSA serve additional uses, i.e. material inspections, and if so, please describe the secondary uses. Use additional pages if necessary.	Description:		
(A	ill the project have an Acces CF)? i.e. Temporarily instal s, complete 4.3.1 and 4.3.2.	lled modular facility. If	O Yes	O _{No}
4.3.1	If yes to 4.3, Describe the expected square footage of the ACF and what rooms/offices are required for operations. i.e. inspection area, SSM office, conference room, CST break room, etc.	Description:		
4.3.2	If yes to 4.3, describe how the ACF will be secured during hours of non-operation. 24/7 CAGs, IDS, CCTV, locks, fence, etc. Use additional pages if necessary.	Description:		

 4.4 Will any of the listed equipment will be used by the SSM Staff to perform their duties? Check all that apply. Notes: If unknown, the AO will confirm required equipment for the SSM Staff to perform their duties. 	 X-Ray Machine Pallet size, typical in SSA Parcel/Airport size, typical in ACF Hand Held Metal Detectors Walk Through Metal Detector Itemizer Digital Documentation Devices Computer(s) Camera(s) Other (anything else not covered above)
4.4.1 Provide any additional information available regarding SSM Staff equipment.	Description:
4.5 Will the construction project ha	ave Intrusion Detection O Yes O No
System (IDS)? If yes, complete	
 4.5.1 If yes to 4.5, describe the construction project IDS and its functions on the project. -Where will the IDS be installed (ACF / SSA / etc.)? -Who will monitor the IDS during construction hours of non-operation? - Who will respond to alarms during construction hours of non-operation? -Who will install the IDS? i.e. US government, security contractor, GC, etc. Use additional pages if necessary. 	Description:

4.6 Will the construction project has	ave Closed Circuit	O Yes	O _{N0}
Television (CCTV)? If yes, complete 4.6.1.		105	100
4.6.1 Describe the construction	Description:		
project CCTV and its	1		
functions on the project.			
-Where will the video			
feed go?			
-Who will monitor the			
CCTV during			
construction hours of			
operation and non-			
operation?			
-Who will install the			
CCTV? i.e. US			
government, security			
contractor, GC, etc.			
Use additional pages if			
necessary.			
4.7 Will the construction project has	ave Biometric Identify	O_{Yes}	O _{No}
Verification? If yes, complete	4.7.1.		
4.7.1 If yes to 4.7, describe the	Description:		
construction project			
biometric verification			
system and its functions			
on the construction			
project.			
-What system will be			
used? i.e. IRIS or			
fingerprint.			
-Who will install the			
IDS? i.e. US			
government, security			
contractor, GC, etc.			
Use additional pages if			
necessary.			
4.8 Will the construction project has	ave additional physical	O_{Yes}	O_{No}
security components not alread	ly discussed? If yes,		
complete 4.8.1.			
4.8.1 If yes to 4.8, describe the	Description:		
additional physical			
security components and			
how they will be used to			
protect the construction			
project. Use additional			
pages if necessary.			

 4.9 Has a cost estimate been completed for Physical Security requirements? If no, complete 4.9.1. Notes: 1. N/A is intended for industry/commercial SCIF owners who may not need to complete a cost estimate. 	O _{Yes}	O _{No}	N/A – Provide description of why it is unknown in section 5 of this document.
4.9.1 If no to 4.9, when will the cost estimate be completed?	Date:		
 4.10 Has a funding source been identified for Physical Security requirements? If no, complete 4.10.1. Notes: 1. N/A is intended for industry/commercial SCIF owners who may not need to identify a funding source. 	O Yes	O _{No}	N/A – Provide description of why it is unknown in section 5 of this document.
4.10.1 If no to 4.10, when will the physical security funding source be identified?	Date:		

Provide additional comments and information about anything discussed in this checklist and/or other	5. ADDITIONAL COMMENTS		
areas of information that the AO should be aware of. Use additional pages if necessary.			
	areas of information that the AO should be aware of. Use additional pages if necessary.		

Section 5, Additional Comments, page <u>1</u> of _____.

Section 5, Additional Comments, page _____ of _____. (If additional pages are necessary, print this page multiple times and number them individually)