

Date: \_\_\_\_\_

APHIS Region:  East  West

Facility Name: \_\_\_\_\_

Point of Contact : \_\_\_\_\_

Facility Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

E-mail: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

\_\_\_\_\_  
 City State Zip Code

*Note: The information requested below should reflect normal security environment and operations on a day-to-day basis. Please use numbers in the brackets when applicable. All entries will be used for databases and input for budgetary and other security associated decisionmaking.*

**1. This section provides a description of the general physical environment associated with your facility/operation.**

**A. Type of Access/Egress to/from the Building**

- Paved
- Dirt
- Gravel
- Other (please specify) \_\_\_\_\_

Maintenance in Winter Months  Yes  No

Major Highway Within  1 mile  2-3 miles  4-6 miles  
 Other: \_\_\_\_\_

Nearest Major City (Airport, Railhead, Bus terminal):  
 Name of City:    
 Name of Airport:

**B. Characteristics of Surrounding Area:**

- Rural
- Industrial
- College Campus
- Neighborhood

**C. Facility Description:**

- Federal Courthouse Only
- Multi-Tenant Federal Building
- Single Tenant Federal Building
- Multi-Tenant Leased Building
- Single Tenant Leased Building
- Other \_\_\_\_\_

**D. The following plans are known to exist and are available onsite:**

- Building Plan  Yes  No
- Floor Plans  Yes  No

**E. Construction:**

Year Completed: \_\_\_\_\_

- Exterior Material(s):  Brick
- Block
- Concrete
- Glass Exterior
- Metal Panels
- Other \_\_\_\_\_

Total Square Footage:    
 (Include office, storage, and circulation space)

Total Number of Floors    
 Above Ground:

Total Number of Floors    
 Below Ground:

Total Number of **Building** Occupants:

Total Number of **APHIS** Occupants:

Total Number of **USDA** Occupants:

Total Number of Daily Visitors (Estimate):

**F. Critical USDA Areas in Operation:**

- Classified Processing Area
- Chemical Storage Area
- Research Lab
- Network System (Computer) Room
- Weapons Storage Area
- Ammunition Storage
- Explosives Storage
- Aircraft Operations/Hangars/Parking
- Government Vehicles \_\_\_\_\_
- Day Care Center
- Outside Playground Area
- Other \_\_\_\_\_

**G. Public Access:**

Distance in yards from the building to the **nearest public street:**

Distance in yards from the building to the **nearest public on-street parking:**

Distance in yards from the building to the **nearest public parking lot:**

Are there public parks, plazas, or other public areas immediately adjacent to the building?

- Yes       No

Are there any commercial businesses (e.g., restaurants, drug stores, banks) with uncontrolled external access in the building?

- Yes       No

**H. Onsite Parking Description (check all that apply):**

- No on-site Parking Available
- Underground Parking
- Above Ground Parking
- Public/Visitor Parking
- Controlled Public/Visitor Access
- Controlled Employee Access
- Security Guard
- Automated/Electronic Control
- Vehicle Barrier(s)

**I. Perimeter Security (check all that apply):**

- No Alarm System
- Alarm System:
  - Operational
  - Non-operational
  - Partially Operational (specify)
  - Alarmed Doors
  - Alarmed Windows
  - Other
- Alarms monitored by:
  - GSA
  - US Marshal Service
  - Private/Contract Security
- Video Surveillance (e.g., CCTV)
  - Operational
  - Non-operational
  - Partially Operational
  - Locally Monitored
  - Remotely Monitored
  - Video Recording
- Exterior Roving Patrol by:
  - GSA FPOs
  - GSA Contract Guards
  - Owner/Lessor Provided Security Guards
  - Other – County Police
- Exterior Barriers
  - Operational
  - Non-operational
  - Concrete
  - Bollards
  - Fences
  - Vehicle Gate Control
  - Planters
  - Other None

Are dumpsters located on site in a secured area?

- Yes       No       Unknown

**J. Emergency Planning**

**(1) Occupant Emergency Plan:**

Does this building have an Occupant Emergency Plan?

- Yes       No       Unknown

(APHIS has plan for their space, other tenants unknown.)

What portions of the plan have been practiced?

- The plan has never been practiced
- Fire Drills
- Natural Disaster (i.e., weather, flood, etc.)
- Bomb Threats
- Other (specify): \_\_\_\_\_

**(2) Reasons the Occupant Emergency Plan was executed (check all that apply):**

- The plan has never been practiced
- Fire
- Natural Disaster (i.e., weather, flood, etc.)
- Bomb Threat
- HAZMAT Event
- Biochemical Event
- Event Associated with Weapons/Explosives
- Vehicle/Aircraft Accident
- Other (specify): \_\_\_\_\_

**K. Security Guards:** *If your site is the recipient of security guard protection, please enter the total number of guards and number of weekly hours of coverage, as appropriate. Please check all that apply.*

<u>Type</u>	<u>Number</u>	<u>Hours</u>
<input type="checkbox"/> No Security Guard Service		
<input type="checkbox"/> GSA FPO Response/Patrol	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> US Marshal Service Court Security Officers	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> GSA Contract Guards	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> Owner/Lessor Provided Security Guards	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

**L. Security Systems (please check all that apply):**

**(1) Monitoring Systems:**

- Duress Alarms
  - Perimeter
  - Interior
- Other Alarms (specify): \_\_\_\_\_
- CCTV
  - Perimeter
  - Interior
- Remote Monitoring Facility
- Security Console on Site
  - Hours console monitored.

**(2) Areas Monitored by Electronic Means (please check all that apply):**

- Lobbies
- Parking
- Stairwells
- Garages
- Building Perimeters
- Other (specify) \_\_\_\_\_
- Secured Corridors
- Office Doors
- Security Screening Posts
- Interior Security Patrol Areas
- Building Entrances

**M. Utilities (please check all that apply):**

**(1) Emergency Power:**

- Generator
- Battery Operated Lighting

**(2) Fire Detection/Suppression System:**

- Complete (all areas of all buildings)
- Partial (specify): alarm tied to fire station \_\_\_\_\_
- None

**2. This section focuses on criminal and terrorist threats.**

**A. Criminal Threat.** *What criminal activities have occurred in or around your building/facility in the past 2 years? Please check all that apply.*

- Arson
- Bombing
- Theft
- Rape/Sexual Assault
- Other Felony/Misdemeanor (please specify): \_\_\_\_\_
- Vandalism
- Telephone Threats
- Malicious Destruction
- Cyber Attack

**B. Terrorist Threat.** *What terrorist activities have occurred in or around your building/facility in the past 5 years (documented cases)? Please check all that apply.*

- Attack from international terrorists
- Attack from domestic special interest terrorists
  - Earth Liberation Front (ELF)
  - Animal Liberation Front (ALF)
  - People for the Ethical Treatment of Animals (PETA)
  - Animal Defense League (ADL)
  - Stop Huntingdon Animal Cruelty (SHAC)
  - Formal hate group(s) (please specify): \_\_\_\_\_
  - Other (please specify): \_\_\_\_\_

Cyber Attack from a known or unknown source.

**C. Greatest Threat or Danger.** *What do you consider the greatest source of danger to your organization and/or fellow workers? Please check all that apply.*

- Attack from international terrorists.
- Attack from domestic special interest terrorists
  - Earth Liberation Front (ELF)
  - Animal Liberation Front (ALF)
  - Animal Defense League (ADL)
  - People for the Ethical Treatment of Animals (PETA)
  - Stop Huntingdon Animal Cruelty (SHAC)
  - Formal hate group(s) (please specify): \_\_\_\_\_
  - Other (please specify): \_\_\_\_\_

- Cyber attack from a known or unknown source
- Stranger(s) accessing your building/site
- Disgruntled/Unstable co-worker(s)
- Work Stress
- Arson
- Assault
- Theft
- Bombing
- Other Felony/Misdemeanor (please specify): \_\_\_\_\_

**3. Miscellaneous.**

<u>Yes</u>	<u>No</u>	<u>Unknown</u>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Building/site has animals
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Site is closing within 1 year
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Site is scheduled for major modifications within 18 months

**Additional Comments (to include a brief description of activities conducted at location):**

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