

Public Utility Security Planning and Readiness Self-Certification Form

(Note: Please do not submit actual Physical, Cyber, Emergency Response or Business Continuity Plans and do not file this form electronically; file a hard copy only)

Questions concerning this form should be directed to the Bureau of Technical Utility Services at 717-787-7904.

Mail the form to: Secretary of the Commission, Pennsylvania Public Utility Commission, Attention Doreen Trout, 400 North Street, Harrisburg, Pa. 17120.

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| Company Name | |
| PUC Certificate Number or Utility Code | |
| Utility/Industry Type | |
| Year Ended | |

| Item No. | Classification | Response | | |
|----------|---|----------|----|------|
| | | Yes | No | N/A* |
| 1. | Does your company have a physical security plan? | | | |
| 2. | Has your physical security plan been reviewed in the last year and updated as needed? | | | |
| 3. | Is your physical security plan tested annually? | | | |
| 4. | Does your company have a cyber-security plan? | | | |
| 5. | Has your cyber security plan been reviewed in the last year and updated as needed? | | | |
| 6. | Is your cyber security plan tested annually? | | | |
| 7. | Does your company have an emergency response plan? | | | |
| 8. | Has your emergency response plan been reviewed in the last year and updated as needed? | | | |
| 9. | Is your emergency response plan tested annually? | | | |
| 10. | Does your company have a business continuity plan? | | | |
| 11. | Does your business continuity plan have a section or annex addressing pandemics? | | | |
| 12. | Has your business continuity plan been reviewed in the last year and updated as needed? | | | |
| 13. | Is your business continuity plan tested annually? | | | |

Briefly explain any N/A responses here:

The foregoing certification must be verified by the officer having control of the security planning for the respondent.

I am authorized to complete this form and verify that the facts set forth above are true and correct to the best of my knowledge, information and belief. This verification is made pursuant to 52 Pa. Code § 1.36 and statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).

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| Signature of Officer Making Verification: | |
| Name of Officer Making Verification: | |
| Title of Officer: | |
| Phone Number of Officer: | |
| Email Address of Officer: | |