Chemical Security Assessment Tool

Personnel Surety Program Instructions

JULY 2019

U.S. Department of Homeland Security
Cybersecurity and Infrastructure Security Agency

Contents

Personnel Surety Program Instructions

Chemical Facility Anti-Terrorism Standards (CFATS)

On December 18, 2014, the President signed into law the Protecting and Securing Chemical Facilities from Terrorist Attacks Act of 2014 ("CFATS Act of 2014") providing long term authorization for the CFATS program. The CFATS Act of 2014 codified the Department's authority to implement the CFATS program into the Homeland Security Act of 2002. (See 6 USC §621 et. seq.)

Section 550 of Public Law 109-295 previously provided (and the CFATS Act of 2014 continues to provide) the Department with the authority to identify and regulate the security of high-risk chemical facilities using a risk-based approach. On April 9, 2007, the Department issued the CFATS Interim Final Rule (IFR), implementing this statutory mandate.   (See 72 FR 17688.)

Do I Need to Submit Information About Affected Individuals to Check for Terrorist Ties?

You need to submit to DHS Affected Individuals to check for terrorist ties if you chose Options 1 or Option 2 in your Security Vulnerability Assessment/Site Security Plan (SVA/SSP) or Security Vulnerability Assessment/Alternative Security Program (SVA/ASP) and that SVA/SSP or SVA/ASP has been approved without a 12(iv) condition. After receiving approval on your SVA/SSP or SVA/ASP, you will have access to the CSAT PSP tab where you can submit Affected Individuals. You will have 60 days from the date of approval to submit all Option 1 and Option 2 Affected Individuals to DHS. Hereafter, any new Affected Individuals after the initial submission must be submitted to DHS prior to being granted access to restricted areas or critical assets.

NOTE If you select Option 3 and/or Option 4 you do not submit Affected Individuals' information to DHS. Thus, Options 3 and 4 are not included in these instructions.

NOTE For more information on RBPS 12(iv) and the Personnel Surety Program, see 84 FR 32768, Notice of Implementation Chemical Facility Anti-Terrorism Standards Personnel Surety Program published on July 9, 2019 or access the DHS Personnel Surety Program.

Who is an "Affected Individual"?

Affected Individuals are defined as:

- facility personnel (e.g., employees, contractors) who have or are seeking access to restricted areas or critical assets; and

- unescorted visitors who have or are seeking access to restricted areas or critical assets.

Facilities can define who facility personnel are for their specific situation. Often the facility includes long-term contractors as facility personnel and other contractors such as cleaning or maintenance staff as visitors. At a minimum, facilities must identify all on-site employees as facility personnel.

There are also certain groups that the Department does not consider to be Affected Individuals, such as (1) Federal officials who gain unescorted access to restricted areas or critical assets as part of their official duties; (2) State and local law enforcement officials who gain unescorted access to restricted areas or critical assets as part of their official duties; and (3) emergency responders at the State or local level who gain unescorted access to restricted areas or critical assets during emergency situations.

NOTE See 6 C.F.R. § 27.230(a)(12), available at the Electronic Code of Federal Regulations (e-CFR) website.

Who Can Access the CSAT PSP Tab?

An Authorizer, Administrator, or PSP Submitter can access the CSAT PSP application through the Personnel Surety Program tab in the CSAT Portal. The PSP tab will only be available to you, if your facility is required to submit Affected Individuals

and if you have an Authorizer, Administrator, or PSP Submitter role. Some examples of users that could be assigned a PSP Submitter role by the Authorizer or an Administrator are (1) an employee of the facility, (2) an employee or contractor of a corporation which owns the facility, or (3) a third-party contractor performing work on behalf of the facility.

NOTE See the CSAT Portal User Manual accessed via the DHS website link https://www.dhs.gov/chemical-security-assessment-tool, for instructions for accessing and utilizing the CSAT PSP tab features.

What are the Privacy Considerations?

Information about Affected Individuals submitted to the Department and/or obtained from the CSAT PSP application is a government record and subject to the Privacy Act of 1974. This information is considered sensitive Personally Identifiable Information (PII).

If sensitive PII is lost, compromised, or disclosed without authorization, it could result in substantial harm, embarrassment, or unfairness to an Affected Individual. Information collected or retained by the facility that has not been submitted to the Department and facility-generated copies of information that have been submitted to the Department are not considered government records and therefore are not covered under the Privacy Act of 1974, 5 U.S.C. § 552a.

NOTE More information about sensitive PII can be found in the DHS Handbook for Safeguarding Sensitive Personal Identifiable Information at https://www.dhs.gov/publication/dhs-handbook-safeguarding-sensitive-pii

When Should I Indicate an Affected Individual No Longer Has Access?

The facility Authorizer, Administrator, and PSP Submitter may at any time notify the Department that an Affected Individual no longer has access to restricted areas or critical assets. You can notify the Department via the CSAT PSP tab by removing the Affected Individual or by entering the date when the individual will no longer have access in the optional field labeled "Date Affected Individual Will No Longer Have Access".

When the Department is notified that an Affected Individual no longer has access to restricted areas or critical assets, the record will no longer be displayed on the CSAT PSP tab. The Department will also (1) initiates the record retention process that results in the eventual deletion of the record of the Affected Individual submitted under Option 1, or (2) stop verifying the Affected Individual's enrollment in other DHS programs under Option 2.

NOTE See the CSAT Portal User Manual accessed via the DHS website link https://www.dhs.gov/chemical-security-assessment-tool, for instructions how to remove an Affected Individual which will give the Department notice the Affected Individual no longer have access to restricted areas or critical assets.

Contact Information

If you have questions or would like additional information, please contact the CSAT Help Desk at CSAT@hq.dhs.gov or 866-323-2957 (toll free) between 8:30 a.m. and 5:00 p.m. (Eastern Time), Monday through Friday.

NOTE The CSAT Help Desk is closed for Federal holidays.

Submitting Information About Affected Individuals Under Option 1

High-risk chemical facilities may submit certain information about Affected Individuals that the Department will use to vet those individuals for terrorist ties. Specifically, the identifying information about Affected Individuals will be compared against identifying information of known or suspected terrorists contained in the federal government's consolidated and integrated terrorist watchlist, the Terrorist Screening Database (TSDB), which is maintained by the Department of Justice (DOJ) Federal Bureau of Investigation (FBI) in the Terrorist Screening Center (TSC).

The section below provides a description of the required and optional information necessary to complete the Option 1 webform in the CSAT PSP application.

NOTE See the Bulk Upload section within this document for more instructions for data field formatting requirements.

Option 1 Information Necessary to Identify Individuals with Terrorist Ties

United States (U.S.) Person

The mandatory information for U.S. Citizens, Nationals and U.S. Lawful Permanent Residents is:

- **First Name**
- **Last Name**
- **Middle Name** (If no middle name enter NMN)
- **Date of Birth** (Format: **MM/DD/YYYY**)
- **Gender** (Format: **M** for male, **F** for female) *OR*;
- **Citizenship**

To reduce the potential for misidentification, and to assist users with record management, the PSP Submitter facility may submit the following optional information about Affected Individuals to the Department.

The optional information is:

- Suffix
- Date Affected Individual Will No Longer Have Access (Format: **MM/DD/YYYY**). **The date must be after the date of submission but less than 10 years.** Enter the date the Affected Individual will no longer have access to restricted areas or critical assets.
- Aliases - Enter any aliases known for the Affected Individual.

- Place of Birth
- Redress Number (Format: **7-digit** number, e.g. 4568219)
- Passport Information
- Alien Registration Number (Format: An **8 or 9-digit** number, can be optionally preceded with an 'A' or 'a.' The number cannot be all 0s or all 9s)
- Any User Defined Fields (UDF)

NOTE A User Defined Field (UDF) is a data field created by the Authorizer or Administrator for storing any additional information to assist with the management of Affected Individual records. **The Department strongly discourages the use of an Affected Individual's Social Security Number as a UDF.**

Non-U.S. Persons

- **First Name**
- **Last Name**
- **Middle Name** (If no middle name enter NMN)
- **Date of Birth** (Format: **MM/DD/YYYY**)
- **Citizenship**
- **Passport Information** *OR*;
- **Alien Registration Number** (Format: An **8 or 9-digit** number, can be optionally preceded with an 'A' or 'a.' The number cannot be all 0s or all 9s)

The optional information is:

- Date Affected Individual Will No Longer Have Access (Format: **MM/DD/YYYY**). **The date must be after the date of submission but less than 10 years.**

- Aliases

- Gender (for non-U.S. Persons)

- Place of Birth

- Redress Number (Format: **7-digit** number, e.g. 4568219).

- Any User Defined Fields (UDF)

Personnel Surety Program Policy Statements for Option 1

Submitting an Affected Individual's Full Name Under Option 1

The facility Authorizer, Administrator and/or PSP Submitter must submit the Affected Individual's full name. This includes an Affected Individual's first name, middle name, last name, and any other known suffix such as "Jr." or "III." The CSAT PSP application will accept a facility's submission if the Affected Individual's name does not contain a suffix because some people do not have a suffix. If the Affected Individual does not have a middle name insert NMN for No Middle Name. If an Affected Individual has a suffix, then a facility is required by policy (not Information Technology (IT) validation rules) to submit that information.

How to Treat an Affected Individual with Dual Citizenship Under Option 1

If the Affected Individual has dual citizenship, of which one is U.S. citizenship, treat the Affected Individual as if they were only a U.S. citizen. It is not required to insert the other citizenship the Affected Individual enjoys.

If the Affected Individual has dual citizenship, and neither is U.S. citizenship, you may select either citizenship to submit.

Submitting Optional Information Under Option 1 to Reduce the Likelihood of False Positives

While the Department will accept, under Option 1, the submission of an Affected Individual's information that meets the minimum requirements, the Department strongly encourages the facility Authorizer, Administrator and/or PSP Submitter to submit the requested optional data elements (i.e., alias(es), gender (for non-U.S. Persons), and place of birth) to reduce the likelihood of false positives. The inclusion of an Affected Individual's Redress Number is particularly helpful because the Redress Number was issued to the Affected Individual to assist with previous events that possibly involved misidentification.

Submitting Both Citizenship and Gender Under Option 1 to Reduce the Likelihood of False Positives

While the Department will accept, under Option 1, the submission of an Affected Individual (if they are a U.S. Person) with either just gender, or just citizenship, the Department strongly encourages the facility Authorizer, Administrator and/or PSP Submitter to submit both data elements to reduce the likelihood of false positives.

Submitting Both Passport Information and Alien Registration Number Under Option 1 to Reduce the Likelihood of False Positives

While the Department will accept the submission of an Affected Individual (if they are a non-U.S. Person) with either just their Passport Information or just their Alien Registration Number, the Department strongly encourages the facility Authorizer, Administrator and/or PSP Submitter to submit both data elements to reduce the likelihood of false positives.

Submitting updates and corrections under Option 1

Section 2102(d)(2)(A)(i) of the Homeland Security Act prohibits the Department from requiring a high-risk chemical facility to submit information about an individual more than one time under Option 1. Therefore, you may choose whether to submit data updates or corrections about Affected Individuals.

The Department believes, however, that there are substantial privacy risks if a high-risk chemical facility opts not to provide updates and corrections (e.g., updating or correcting a name or date of birth) about Affected Individuals. Specifically, the accuracy of an Affected Individual's personal data being vetted against the Terrorist Screening Database (TSDB) for terrorist ties may be affected. Accurate information both (1) increases the likelihood of correct matches against information about known or suspected terrorists, and (2) decreases the likelihood

of incorrect matches that associate Affected Individuals without terrorist ties with known or suspected terrorist identities. As a result, the Department encourages high-risk chemical facilities to submit updates and corrections as they become known so that the Department's checks for terrorist ties, which are done on a recurrent basis, are accurate. If your facility is either unable or unwilling to update or correct an Affected Individual's information, the Affected Individual may seek redress as described in the CFATS PSP Privacy Impact Assessment[1].

Submitting Information About Affected Individuals Under Option 2

You may submit information to the Department about Affected Individuals possessing the appropriate credentials to enable the Department to electronically verify the Affected Individuals' enrollments in these other programs. The Department will subsequently notify the facility through the CSAT PSP tab PSP Submitter whether an Affected Individual's enrollment in one of these other DHS programs was electronically verified.

The Department will also periodically re-verify each Affected Individual's continued enrollment in one of these other programs, and notify the facility Authorizer, Administrator and/or PSP Submitter of significant changes in the status of an Affected Individual's enrollment (e.g., if an Affected Individual who has been enrolled in the Hazardous Material Endorsement (HME) Program ceases to be enrolled, the Department would change the status of the Affected Individual in the CSAT PSP tab and notify the Authorizer, Administrator and/or PSP Submitter through the CSAT Portal homepage).

Revert to Option 1

Select the check box if you would like the Department to automatically submit an Affected Individual's record under Option 1, when the Department is not able to verify an Affected Individual or is no longer able to verify an Affected Individual that was previously submitted and verified under Option 2.

The purpose of the 'Revert to Option 1' checkbox is to reduce the burden on facilities. In the event the record either cannot be verified or is later unable to be verified, and the 'Revert to Option 1' has been selected, the CSAT PSP application will automatically submit the record under Option 1 if either of the following two situations occurs:

- The record submitted under Option 2 has a change in status from 'Verification Pending' to 'Not Verified.'

- The record submitted under Option 2 has a change in status from 'Verified' to 'No Longer Verified.'

NOTE See the Affected Individual Record After Submission section within this document for more information regarding Affected Individual record status.

NOTE Verifying an Affected Individual's enrollment in the TWIC Program, HME Program or one of the Trusted Traveler Programs is optional. If it is administratively easier for a high-risk chemical facility to input a record about an Affected Individual to identify terrorist ties under Option 1, the facility may do so.

Option 2A - Information Necessary to

Verify Individuals with TWIC

Selecting this option will enable the Department to verify the

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[1] The original Privacy Impact Assessment for the CFATS PSP, published in 2011, and its subsequent updates are available at http://www.dhs.gov/publication/dhs-nppd-pia-018a-chemical-facilities-anti-terrorism-standards-personnel-surety.

Affected Individual's enrollment via the TWIC program.

NOTE See Appendix A for more instructions to locate the TWIC Agency Serial Number and Expiration Date from the TWIC card.

Option 2A with Revert to Option 1 Selected

U.S. Person

The mandatory information for U.S. Citizens, Nationals and U.S. Lawful Permanent Residents is:

- **Last Name**
- **First Name**
- **Middle Name** (If no middle name, enter NMN)
- **Date of Birth** (Format: **MM/DD/YYYY**)
- **Gender** (Format: **M** for male, **F** for female) **OR**;
- **Citizenship**
- **TWIC Agency Serial Number (**Format: **8 or 16 digits)**
- **Expiration Date Displayed on TWIC (**Format: **MM/DD/YYYY)**

To reduce the potential for misidentification, and to assist users with record management, the Authorizer and PSP Submitter may submit the following optional information about Affected Individuals to the Department.

The optional information is:

- Suffix
- Date Affected Individual Will No Longer Have Access (Format: **MM/DD/YYYY**). **The date must be after the date of submission but less than 10 years.** Enter the date the Affected Individual will no longer have access to restricted areas or critical assets.
- Aliases - Enter any aliases known for the Affected Individual.
- Place of Birth
- Passport Information
- Alien Registration Number (Format: An **8 or 9-digit** number, can be optionally preceded with an 'A' or 'a.' The number cannot be all 0s or all 9s)
- Redress Number (Format: **7-digit** number, e.g. 4568219)
- Any User Defined Fields (UDF)

NOTE A User Defined Field (UDF) is a data field created by the Authorizer or Administrator for storing any additional information to assist with the management of Affected Individual records. **The Department strongly discourages the use of an Affected Individual's Social Security Number as a UDF.**

Non-U.S. Persons

- **Last Name**
- **First Name**
- **Middle Name** (If no middle name enter NMN)
- **Date of Birth** (Format: **MM/DD/YYYY)**
- **Citizenship**
- **Passport Information OR**;
- **Alien Registration Number** (Format: An **8 or 9-digit** number, can be optionally preceded with an 'A' or 'a.' The number cannot be all 0s or all 9s)
- **TWIC Agency Serial Number (**Format: **8 or 16 digits)**
- **Expiration Date Displayed on TWIC (**Format: **MM/DD/YYYY)**

The optional information is:

- Suffix
- Date Affected Individual Will No Longer Have Access (Format: **MM/DD/YYYY**). **The date must be after the date of submission but less than 10 years.**
- Aliases
- Gender (for non-U.S. Persons)
- Place of Birth
- Redress Number (Format: **7-digit** number, e.g. 4568219)
- Any User Defined Fields (UDF)

Option 2A Without Revert to Option 1 Selected

U.S. and Non-U.S. Person

The mandatory information for U.S. Citizens, Nationals and U.S. Lawful Permanent Residents is:

- **Last Name**
- **First Name**
- **Middle Name** (If no middle name, enter NMN)

- **Date of Birth** (Format: **MM/DD/YYYY**)
- **TWIC Agency Serial Number (**Format: **8 or 16 digits)**
- **Expiration Date Displayed on TWIC (**Format: **MM/DD/YYYY)**

To reduce the potential for misidentification, and to assist users with record management, the Authorizer, Administrator and PSP Submitter may submit the following optional information about Affected Individuals to the Department.

The optional information is:

- Suffix
- Date Affected Individual Will No Longer Have Access (Format: **MM/DD/YYYY**). **The date must be after the date of submission but less than 10 years.**
- Place of Birth
- Gender
- Citizenship
- Alien Registration Number (Format: An **8 or 9-digit** number, can be optionally preceded with an 'A' or 'a.' The number cannot be all 0s or all 9s)
- Aliases
- Any User Defined Fields (UDF)

Option 2B - Information Necessary to Verify Individuals with HME

Selecting this option will enable the Department to verify the Affected Individual's enrollment via the HME program.

Option 2B with Revert to Option 1 Selected

U.S. Person

The mandatory information for U.S. Citizens, Nationals and U.S. Lawful Permanent Residents is:

- **Last Name**
- **First Name**
- **Middle Name** (If no middle name enter NMN)
- **Date of Birth** (Format: **MM/DD/YYYY**)
- **Gender** (Format: **M** for male, **F** for female) *OR*;
- **Citizenship**
- **Expiration Date Displayed on the Commercial**

Driver's License (Format: **MM/DD/YYYY)**
- **Issuing State of Commercial Driver's License Number** (Format: US Postal Code **Alpha-2 code**)

To reduce the potential for misidentification, and to assist users with record management, the Authorizer, Administrator and PSP Submitter may submit the following optional information about Affected Individuals to the Department.

The optional information is:

- Suffix
- Date Affected Individual Will No Longer Have Access (Format: **MM/DD/YYYY**). **The date must be after the date of submission but less than 10 years.**
- Aliases
- Passport Information
- Alien Registration Number (Format: An **8 or 9-digit** number, can be optionally preceded with an 'A' or 'a.' The number cannot be all 0s or all 9s)
- Place of Birth
- Redress Number (Format: **7-digit** number, e.g. 4568219)
- Any User Defined Fields (UDF)

NOTE A User Defined Field (UDF) is a data field created by the Authorizer or Administrator for storing any additional information to assist with the management of Affected Individual records. **The Department strongly discourages the use of an Affected Individual's Social Security Number as a UDF.**

Non-U.S. Persons

- **Last Name**
- **First Name**
- **Middle Name** (If no middle name, enter NMN)
- **Date of Birth** (Format: **MM/DD/YYYY)**
- **Citizenship**
- **Passport Information** *OR*;
- **Alien Registration Number** (Format: An **8 or 9-digit** number, can be optionally preceded with an 'A' or 'a.' The number cannot be all 0s or all 9s)
- **Expiration Date Displayed on the Commercial Driver's License** (Format: **MM/DD/YYYY)**
- **Issuing State of Commercial Driver's License Number** (Format: US Postal Code **Alpha-2 code**)

The optional information is:

- Suffix

- Date Affected Individual Will No Longer Have Access (Format: **MM/DD/YYYY**). **The date must be after the date of submission but less than 10 years.**

- Aliases

- Gender (for non-U.S. Persons)

- Place of Birth

- Redress Number (Format: **7-digit** number, e.g. 4568219)

- Any User Defined Fields (UDF)

Option 2B Without Revert to Option 1 Selected

U.S. and Non-U.S. Person

The mandatory information for U.S. Citizens, Nationals and U.S. Lawful Permanent Residents is:

- **Last Name**
- **First Name**
- **Middle Name** (If no middle name, enter NMN)
- **Date of Birth** (Format: **MM/DD/YYYY**)
- **Expiration Date Displayed on the Commercial Driver's License** (Format: **MM/DD/YYYY)**
- **Issuing State of Commercial Driver's License Number** (Format: US Postal Code **Alpha-2 code**)

To reduce the potential for misidentification, and to assist users with record management, the Authorizer, Administrator and PSP Submitter may submit the following optional information about Affected Individuals to the Department.

The optional information is:

- Suffix
- Date Affected Individual Will No Longer Have Access (Format: **MM/DD/YYYY**). **The date must be after the date of submission but less than 10 years.**
- Place of Birth
- Gender
- Citizenship
- Alien Registration Number (Format: An **8 or 9-digit** number, can be optionally preceded with an 'A' or 'a.' The number cannot be all 0s or all 9s)
- Aliases
- Passport Information
- Any User Defined Fields (UDF)

Option 2C - Information Necessary to Verify Individuals with Trusted Traveler Programs

Selecting this option will enable the Department to verify the Affected Individual's enrollment via the Trusted Traveler programs. These programs are:

- NEXUS

- Free and Secure Trade (FAST)
- Global Entry
- Secure Electronic Network for Travelers Rapid Inspection (SENTRI)

NOTE If you are a Trusted Traveler member you can find your PASSID, including the name you used to enroll with the trusted Traveler program, on your Global Online Enrollment System (GOES) account at http://www.cbp.gov/travel/trusted-traveler-programs.

NOTE See Appendix B for an example of a Trusted Traveler Program PASSID member card.

Option 2C with Revert to Option 1 Selected

U.S. Person

The mandatory information for U.S. Citizens, Nationals and U.S. Lawful Permanent Residents is:

- **Last Name**
- **First Name**
- **Middle Name** (If no middle name, enter NMN)
- **Date of Birth** (Format: **MM/DD/YYYY**)
- **Gender** (Format: **M** for male, **F** for female) *OR*;
- **Citizenship**
- **Trusted Traveler Program** (Select from dropdown list)
- **PASSID Number** (Format: **9-digit number**)
- **Expiration Date Displayed on the Trusted Traveler Program Credential** (Format: **MM/DD/YYYY**)

To reduce the potential for misidentification, and to assist users with record management, the Authorizer, Administrator and PSP Submitter may submit the following optional information about Affected Individuals to the Department.

The optional information is:

- Suffix
- Date Affected Individual Will No Longer Have Access (Format: **MM/DD/YYYY**). **The date must be after the date of submission but less than 10 years.**
- Aliases
- Passport Information

- Alien Registration Number (Format: An **8 or 9-digit** number, can be optionally preceded with an 'A' or 'a.' The number cannot be all 0s or all 9s)

- Place of Birth

- Redress Number (Format: **7-digit** number, e.g. 4568219)

- Any User Defined Fields (UDF)

NOTE A User Defined Field (UDF) is a data field created by the Authorizer or Administrator for storing any additional information to assist with the management of Affected Individual records. **The Department strongly discourages the use of an Affected Individual's Social Security Number as a UDF.**

Non-U.S. Persons

- **Last Name**

- **First Name**

- **Middle Name** (If no middle name, enter NMN)

- **Date of Birth** (Format: **MM/DD/YYYY)**

- **Citizenship**

- **Passport Information *OR*;**

- **Alien Registration Number** (Format: An **8 or 9-digit** number, can be optionally preceded with an 'A' or 'a.' The number cannot be all 0s or all 9s)

- **Trusted Traveler Program** (Select from dropdown list)

- **PASSID Number** (Format: **9-digit number**)

- **Expiration Date Displayed on the Trusted Traveler Program Credential** (Format: **MM/DD/YYYY**)

The optional information is:

- Suffix

- Date Affected Individual Will No Longer Have Access (Format: **MM/DD/YYYY**). **The date must be after the date of submission but less than 10 years.**

- Aliases

- Gender (for non-U.S. Persons)

- Place of Birth

- Redress Number (Format: **7-digit** number, e.g. 4568219)

- Any User Defined Fields (UDF)

Option 2C Without Revert to Option 1 Selected

U.S. and Non-U.S. Person

The mandatory information for U.S. Citizens, Nationals and U.S. Lawful Permanent Residents is:

- **Last Name**

- **First Name**

- **Middle Name** (If no middle name, enter NMN)

- **Date of Birth** (Format: **MM/DD/YYYY**)

- **Trusted Traveler Program** (Select from dropdown list)

- **PASSID Number** (Format: **9-digit number**)

- **Expiration Date Displayed on the Trusted Traveler Program Credential** (Format: **MM/DD/YYYY**)

To reduce the potential for misidentification, and to assist users with record management, the Authorizer, Administrator and PSP Submitter may submit the following optional information about Affected Individuals to the Department.

The optional information is:

- Suffix

- Date Affected Individual Will No Longer Have Access (Format: **MM/DD/YYYY**). **The date must be after the date of submission but less than 10 years.**

- Place of Birth

- Gender

- Citizenship

- Alien Registration Number (Format: An **8 or 9-digit** number, can be optionally preceded with an 'A' or 'a.' The number cannot be all 0s or all 9s)

- Aliases

- Any User Defined Fields (UDF)

Personnel Surety Program Policy Statements for Option 2

Submitting an Affected Individual's full name under Option 2

The facility Authorizer, Administrator and/or PSP Submitter must submit the Affected Individual's name that is displayed on the credential. Providing a full name other than what is displayed on the credential may result in the Department being

unable to verify the Affected Individual's enrollment via the CSAT PSP application.

NOTE Trusted Traveler members who do not have a card can find their PASSID, including the name they used to enroll with the trusted Traveler program, on their GOES account at http://www.cbp.gov/travel/trusted-traveler-programs.

Submitting, under Option 2, optional information about Affected Individuals to the Department to reduce the potential for misidentification

While the Department will accept, under Option 2, the submission of an Affected Individual's information that meets the minimum requirements, the Department strongly encourages the facility Authorizer, Administrator and/or PSP Submitter to submit the requested optional data elements (i.e., alias(es), gender, place of birth, and citizenship) to reduce the likelihood of misidentification.

How to treat an Affected Individual who has dual citizenship under Option 2

Submission of citizenship information is optional under Option 2. If a facility submits optional citizenship information, the following guidance applies:

If the Affected Individual has dual citizenship, of which one is U.S. citizenship, treat the Affected Individual as if they were only a U.S. citizen.

If the Affected Individual has dual citizenship, and neither is U.S. citizenship, you may select either citizenship to submit.

Submitting updates and corrections under Option 2

Section 2102(d)(2)(A)(i) of the Homeland Security Act prohibits the Department from requiring a high-risk chemical facility to submit information about an individual more than one time under Option 2. Therefore, under Option 2, a high-risk chemical facility may choose whether to submit data updates or corrections about Affected Individuals.

The Department believes, however, that there are substantial privacy risks if a high-risk chemical facility opts not to provide updates and corrections (e.g., updating or correcting a name or date of birth) about Affected Individuals. Specifically, the accuracy of an Affected Individual's personal data being vetted against the TSDB for terrorist ties may be affected. Accurate information both (1) increases the likelihood of correct matches against information about known or suspected terrorists, and (2) decreases the likelihood of incorrect matches that associate Affected Individuals without terrorist ties with known or suspected terrorist identities. As a result, the Department encourages high-risk chemical facilities to submit updates and corrections as they become known so that the Department's checks for terrorist ties, which are done on a recurrent basis, are accurate. If a high-risk chemical facility is either unable or unwilling to update or correct an Affected Individual's information, the Affected Individual may seek redress as described in the CFATS PSP Privacy Impact Assessment.[2]

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[2] The original Privacy Impact Assessment for the CFATS PSP, published in 2011, and its subsequent updates are available at http://www.dhs.gov/publication/dhs-nppd-pia-018a-chemical-facilities-anti-terrorism-standards-personnel-surety.

Bulk Upload

The Bulk Upload capability may process up to 10,000 Affected Individual records at a time. Bulk Upload files can be input in either an XLS or XLSX file. Every Affected Individual record submitted through the Bulk Upload process must contain data in the required fields, as seen in the tables below.

The bulk upload template can be accessed from the Personnel Surety Program tab in the CSAT Portal or from the CSAT Portal User Manual found by accessing the DHS website link https://www.dhs.gov/chemical-security-assessment-tool.

A single bulk upload may contain records in any combination of the below types:

- Option 1

- Option 2 (Revert to Option 1 - Selected) and;

- Option 2, (Revert to Option 1 – Not Selected)

The tables below summarize the validation rules for each record within the Bulk Upload template. The validation rules are instructions for the IT system to ensure that a record about Affected Individuals is complete and able to be processed. However, just because a record about an Affected Individual is complete does not mean that the record has complied with the Department's submission requirements. Validation rules should not be confused with program policies. The facility Authorizer, Administrator and/or PSP Submitter must ensure that the record complies with the Department's submission requirements as listed in the Implementation Notice and the policy statement in this document.

For example: The CSAT PSP application will accept as complete (i.e., system required fields are complete) a record about an Affected Individual under Option 1 which does not contain the Affected Individual's suffix because some Affected Individuals will not have a suffix. However, the Department requires a facility to submit an Affected Individual's full name (see the implementation notice and the policy statements in Personnel Surety Program Policy Statements for Option 1 and Personnel Surety Program Policy Statements for Option 2). Thus, if a facility knows the Affected Individual has a suffix, the PSP Submitter is required to provide the suffix when submitting the Affected Individual's record to the Department.

NOTE Revert to Option 1" – Enter **Yes** if you would like the Department to automatically submit an Affected Individual's record under Option 1, when the Department is no longer able to verify an Affected Individual that was previously submitted and verified under Option 2. If you do not want to use this option, you may enter **No** for the data field value or leave the field blank.

NOTE Verifying an Affected Individual's enrollment in the TWIC Program, HME Program or one of the Trusted Traveler Programs is optional. If it is administratively easier for a high-risk chemical facility to input a record about an Affected Individual to identify terrorist ties under Option 1, the facility may do so.

Bulk Upload - Option 1 Data Field Requirements

The table provides the data field description, validation rules and formatting requirements for submitting Affected Individuals with Option 1.

Option 1 Bulk Upload – Field Mapping			
Field	**Description**	**Validation Rules**	**Format**
Last Name	Affected Individual's last name	Required	Non-null string Example: Smith
First Name	Affected Individual's first name	Required	Non-null string Example: John
Middle Name	Affected Individual's middle name	Required	Non-null string Example: Leon **If the Affected Individual does not have a middle name enter "**NMN**".
Suffix	Affected Individual's suffix	Optional	JR–Junior SR–Senior I–First II–Second III–Third IV–Fourth V–Fifth VI–Sixth VII–Seventh VIII–Eighth IX–Ninth X–Tenth
Alias Last Name	Alternative last name	Required: Only when adding an alias(es) to the submission of an Affected Individual	Non-null string Example: Jones
Alias First Name	Alternative first name	Required: Only when adding an alias(es) to the submission of an Affected Individual	Non-null string Example: Sam
Alias Middle Name	Alternative middle name	Required: Only when adding an alias(es) to the submission of an Affected Individual	Non-null string Example: William **If the Affected Individual does not have an alias middle name enter "**NMN**".

Option 1 Bulk Upload – Field Mapping			
Field	**Description**	**Validation Rules**	**Format**
Alias Suffix	Alternative suffix	Optional	JR–Junior SR–Senior I–First II–Second III–Third IV–Fourth V–Fifth VI–Sixth VII–Seventh VIII–Eighth IX–Ninth X–Tenth
Date of Birth	Affected Individual's date of birth	Required	MM/DD/YYYY
City of Birth	City of individual's place of birth	Optional	String between 1-100 characters
Country of Birth	Country of individual's place of birth	Optional	Must be ISO 3166 Alpha-3 code www.iso.org
Gender	Affected Individual's gender	Required: If the data field Country of Citizenship is null	M–for Male F–for Female
Country of Citizenship	Individual's country of citizenship	Required: If either, (1) the data field Gender is null, or (2) passport number or passport country are populated.	Must be ISO 3166 Alpha-3 code www.iso.org
Passport Country	Country issuing the passport	Required: If passport number is populated	Must be ISO 3166 Alpha-3 code www.iso.org
Passport Number	Passport number	Required: If passport country is populated	String between 1-20 characters Example: P145827364
Redress Number	Redress number	Optional	7-digit number Example: 4568219

Option 1 Bulk Upload – Field Mapping			
Field	**Description**	**Validation Rules**	**Format**
Alien Registration	Alien registration number	Optional	An 8- or 9-digit number, can be optionally preceded with an 'A' or 'a.' The number cannot be all 0s or all 9s. Example: A001001073 or 001001073
Revert to Option 1	This field is required only with Option 2.	Must be blank	Leave blank
Custom Field ID	This field refers to the User Defined Field (UDF) ID number that is given after a UDF is created within the system.	Optional	Numbers only
Value	Value of UDF. This is the information applicable to the field in the application.	Optional: Can be number, letters, and special characters. No longer than 200 characters.	There is no format for this field
No Access Date	Date when Affected Individual will no longer have access to restricted areas or critical assets at a facility. Upon the specified date, the Affected Individual will no longer be vetted.	Optional: The date must be greater than the day of submission and less than 10 years from now	MM/DD/YYYY

Table 1: Option 1 Bulk Upload – Field Mapping

Bulk Upload - Option 2 Data Field Requirements

Revert to Option 1 - SELECTED

The table provides the data field description, validation rules and formatting requirements for submitting Affected Individuals with Option 2 **AND** the "Revert to Option 1" is selected.

Option 2 (Revert to Option 1) Bulk Upload – Field Mapping			
Field	**Description**	**Validation Rules**	**Format**
Last Name	Affected Individual's last name	Required	Non-null string Example: Smith
First Name	Affected Individual's first name	Required	Non-null string Example: John
Middle Name	Affected Individual's middle name	Required	Non-null string Example: Leon **If the Affected Individual does not have a middle name enter "NMN".**
Suffix	Affected Individual's suffix	Optional	JR–Junior SR–Senior I–First II–Second III–Third IV–Fourth V–Fifth VI–Sixth VII–Seventh VIII–Eighth IX–Ninth X–Tenth
Alias Last Name	Alternative last name	Required: Only when adding an alias(es) to the submission of an Affected Individual	Non-null string Example: Jones
Alias First Name	Alternative first name	Required: Only when adding an alias(es) to the submission of an Affected Individual	Non-null string Example: Sam

Option 2 (Revert to Option 1) Bulk Upload – Field Mapping			
Field	**Description**	**Validation Rules**	**Format**
Alias Middle Name	Alternative middle name	Required: Only when adding an alias(es) to the submission of an Affected Individual	Non-null string Example: William **If the Affected Individual does not have an alias middle name enter "NMN".**
Alias Suffix	Alternative suffix	Optional	JR–Junior SR–Senior I–First II–Second III–Third IV–Fourth V–Fifth VI–Sixth VII–Seventh VIII–Eighth IX–Ninth X–Tenth
Date of Birth	Affected Individual's date of birth	Required	MM/DD/YYYY
City of Birth	City of individual's place of birth	Optional	String between 1-100 characters
Country of Birth	Country of individual's place of birth	Optional	Must be ISO 3166 Alpha-3 code www.iso.org
Gender	Affected Individual's gender	Required: If the data field Country of Citizenship is null	M–for Male F–for Female
Country of Citizenship	Individual's country of citizenship	Required: If either, (1) the data field Gender is null, or (2) passport number or passport country are populated.	Must be ISO 3166 Alpha-3 code www.iso.org
Passport Country	Country issuing the passport	Required: If passport number is populated	Must be ISO 3166 Alpha-3 code www.iso.org

Option 2 (Revert to Option 1) Bulk Upload – Field Mapping			
Field	**Description**	**Validation Rules**	**Format**
Passport Number	Passport number	Required: If passport country is populated	String between 1-20 characters. Example: P145827364
Redress Number	Redress number	Optional	7-digit number Example: 4568219
Alien Registration	Alien registration number	Optional	An 8- or 9-digit number, can be optionally preceded with an 'A' or 'a.' The number cannot be all 0s or all 9s. Example: A001001073 or 001001073
Global ID *This is the unique number associated with the DHS Program credential.	CDL Number	Required: Must be populated to verify enrollment in DHS program	CDL Numbers vary across States based on formats
	TWIC Agency Serial Number		TWIC number 8 or 16 digits
	PASSID for FAST, Global Entry (GOES), NEXUS and SENTRI		9- digit number for: GOES, NEXUS, FAST, and SENTRI
Global Type *This is the type of enrollment program (TWIC, HME, Trusted Traveler)	Identifies the DHS Program being verified	Required: Enter one of the following values for each entry. Input of these values must be exact.	CDL/HME
			TWIC
			GOES, NEXUS, FAST, and SENTRI
CDL State	State abbreviation	Required: When DHS program is CDL/HME	Must be U.S. Postal Service Alpha-2 code www.usps.com
Expiration Date	Expiration date for the program being selected for verification. Commonly known as the credential's expiration date.	Required: For all Option 2 submissions	MM/DD/YYYY

Option 2 (Revert to Option 1) Bulk Upload – Field Mapping			
Field	**Description**	**Validation Rules**	**Format**
Revert to Option 1	If this submission should automatically revert to Option 1 under the system rules, then a value must be entered.	Required: All Option 2 submissions that are 'Revert to Option 1' must contain a 'Yes' in the value for each Affected Individual submitted	**Yes** - value only
Custom Field ID	This field refers to the User Defined Field (UDF) ID number that is given after a UDF is created within the system.	Optional	Numbers only
Value	Value of UDF. This is the information applicable to the field for the user.	Optional: Can be number, letters and special characters.	String between 1-200 characters.
No Access Date	Date when Affected Individual will no longer have access to restricted areas or critical assets at a facility. Upon the specified date, the Affected Individual will no longer have access.	Optional: The date must be greater than the day of submission and less than 10 years from now	MM/DD/YYYY

Table 2: Option 2 (Revert to Option 1) Bulk Upload - Field Mapping

Revert to Option 1 - NOT SELECTED

The table provides the data field description, validation rules and formatting requirements for submitting Affected Individuals with Option 2 and **NO** "Revert to Option 1".

Option 2 Bulk Upload – Field Mapping (No Revert to Option 1)			
Field	**Description**	**Validation Rules**	**Format**
Last Name	Affected Individual's last name	Required	Non-null string Example: Smith
First Name	Affected Individual's first name	Required	Non-null string Example: John

Option 2 Bulk Upload – Field Mapping (No Revert to Option 1)			
Field	**Description**	**Validation Rules**	**Format**
Middle Name	Affected Individual's middle name	Required	Non-null string Example: Leon *If the Affected Individual does not have a middle name enter "**NMN**".
Suffix	Affected Individual's suffix	Optional	JR–Junior SR–Senior I–First II–Second III–Third IV–Fourth V–Fifth VI–Sixth VII–Seventh VIII–Eighth IX–Ninth X–Tenth
Alias Last Name	Alternative last name	Required: Only when adding an alias(es) to the submission of an Affected Individual	Non-null string Example: Jones
Alias First Name	Alternative first name	Required: Only when adding an alias(es) to the submission of an Affected Individual	Non-null string Example: Sam
Alias Middle Name	Alternative middle name	Required: Only when adding an alias(es) to the submission of an Affected Individual	Non-null string Example: William *If the Affected Individual does not have an alias middle name enter "**NMN**".

Option 2 Bulk Upload – Field Mapping (No Revert to Option 1)			
Field	**Description**	**Validation Rules**	**Format**
Alias Suffix	Alternative suffix	Optional	JR–Junior SR–Senior I–First II–Second III–Third IV–Fourth V–Fifth VI–Sixth VII–Seventh VIII–Eighth IX–Ninth X–Tenth
Date of Birth	Affected Individual's date of birth	Required	MM/DD/YYYY
City of Birth	City of individual's place of birth	Optional	String between 1-100 characters
Country of Birth	Country of individual's place of birth	Optional	Must be ISO 3166 Alpha-3 code www.iso.org
Gender	Affected Individual's gender	Optional	M–for Male F–for Female
Country of Citizenship	Individual's country of citizenship	Optional	Must be ISO 3166 Alpha-3 code www.iso.org
Passport Country	Country issuing the passport	Optional	Must be ISO 3166 Alpha-3 code www.iso.org
Passport Number	Passport number	Optional	String between 1-20 characters Example: P145827364
Redress Number	Redress number	Optional	7-digit number Example: 4568219

Option 2 Bulk Upload – Field Mapping (No Revert to Option 1)			
Field	**Description**	**Validation Rules**	**Format**
Alien Registration	Alien registration number	Optional	An 8- or 9-digit number, can be optionally preceded with an 'A' or 'a.' The number cannot be all 0s or all 9s. Example: A001001073 or 001001073
Global ID *This is the unique number associated with the DHS Program credential.	CDL Number	Required: Must be populated to verify enrollment in DHS program	CDL Numbers vary across States based on formats
	TWIC Agency Serial Number		TWIC 8 or 16 digits
	PASSID for FAST, Global Entry (GOES), NEXUS and SENTRI		9- digit number for: GOES, NEXUS, FAST, and SENTRI
Global Type *This is the type of enrollment program (TWIC, HME, Trusted Traveler)	Identifies the DHS Program being verified	Required: Enter one of the following values for each entry. Input of these values must be exact.	CDL/HME
			TWIC
			GOES, NEXUS, FAST, and SENTRI
CDL State	State abbreviation	Required: When DHS program is CDL/HME	Must be U.S. Postal Service Alpha-2 code www.usps.com
Expiration Date	Expiration date for the program being selected for verification. Commonly known as the credential's expiration date.	Required: For all Option 2 submissions	MM/DD/YYYY
No Access Date	Date when Affected Individual will no longer have access to restricted areas or critical assets at a facility. Upon the specified date the Affected Individual's enrollment will no longer be verified.	Optional: The date must be greater than today and less than 10 years from now.	MM/DD/YYYY

Option 2 Bulk Upload – Field Mapping (No Revert to Option 1)			
Field	**Description**	**Validation Rules**	**Format**
Revert to Option 1	If this submission should not automatically revert to Option 1 under the system rules, then a value must be entered.	Required: All Option 2 submissions that are not 'Revert to Option 1' must contain a '**No**' in the value for each Affected Individual submitted	**No** - value only
Custom Field ID	This field refers to the User Defined Field (UDF) ID number that is given after a UDF is created within the system	Optional	Numbers only
Value	Value of UDF. This is the information applicable to the field for the user.	Optional: Can be number, letters and special characters.	String between 1-200 characters.

Table 3: Bulk Upload - Field Mapping (No Revert to Option 1)

Affected Individual Record After Submission

This section describes the Affected Individual record status that CSAT PSP displays after the record is submitted to the Department.

Status – Option 1

Submitted

The record has been submitted to the Department for vetting of terrorist ties.

Status – Option 2

Verification Pending

The record has been submitted to the Department for verification of the Affected Individual's enrollment and the Department is in the process of verifying enrollment.

Verified

The Department has verified the Affected Individual's enrollment.

NOTE   When a record is 'Verified,' the Department will display the projected date the facility may no longer rely on the Affected Individual's participation in the other DHS programs for purposes of checking for terrorist ties to comply with RBPS 12(iv).

Not Verified

The Department was unable to verify the Affected Individual's enrollment.

No Longer Verified

The Department is no longer able to verify the Affected Individual's enrollment.

This status occurs only when the previous status was 'Verified.' The Department will also periodically re-verify each Affected Individual's continued enrollment in one of these other programs, and notify the Authorizer, Administrator and/or PSP Submitter of significant changes in the status of an Affected Individual's enrollment (e.g., if an Affected Individual who has been enrolled in the HME Program ceases to be enrolled, then the Department would change the status of the Affected Individual displayed in the CSAT PSP tab and notify the Authorizer, Administrator and/or PSP Submitter). Electronic verification and re-verification ensure that both the Department and the high-risk chemical facility can rely upon the continuing validity of an Affected Individual's credential or endorsement.

Groups and User Management

If you are an Authorizer or have been assigned an Administrator role, you can create and manage groups to efficiently view and/or edit Affected Individuals' records. Groups are created to manage the purview of PSP Submitters who will be submitting information about Affected Individuals and to avoid inappropriate disclosure of sensitive Personally Identifiable Information (PII). PSP Submitters may be assigned to view and /or edit those records under their assigned purview. PSP Submitters are designated individuals who may submit information about Affected Individuals on behalf of the Authorizer. Some examples of PSP Submitters are (1) an employee of the facility, (2) an employee or contractor of a corporation which owns the facility, or (3) a third-party contractor performing work on behalf of the facility. A PSP Submitter may only be assigned to one group under an Authorizer.

Corporation Group

When the Department initially grants the Authorizer and Administrators access to the CSAT PSP application, a default group labeled "Corporation (Employees Only)" is established. As an Authorizer or Administrator, you can only edit records about Affected Individuals in the "Corporation" group, but you can view records submitted under all other groups. The record about an Affected Individual will be assigned to the group of the PSP Submitter. For example, when an Authorizer or PSP Submitter assigned to the "Corporation" group submits information about Affected Individuals, the record will be assigned to the "Corporation" group.

It is also possible that the best group structure for some facilities may be to not create any additional groups at all and rely on the default "Corporation" group. A new group is not required for each individual PSP Submitter. Multiple PSP Submitters can be assigned to a single group. However, a group should have at least one PSP Submitter assigned to it.

Additional best practices and tips may be found by visiting https://www.dhs.gov/cfats-personnel-surety-program.

An Authorizer may assign additional PSP Submitters to the "Corporation" group; however, the Department expects only employees of the corporation/facility to be assigned to the "Corporation" group. Any PSP Submitter assigned to the "Corporation" group will have access to all Affected Individual records in all groups submitted under the Authorizer's purview.

See the CSAT Portal User Manual accessed via the DHS website link https://www.dhs.gov/chemical-security-assessment-tool, for instructions how to create and manage groups.

The Department expects an Authorizer will carefully consider the best group structure so information about Affected Individuals can be protected from unauthorized disclosure. Specifically, the Department expects the Authorizer will create one or more groups if needed so PSP Submitter(s) will: (1) have access to only those records about Affected Individuals they should have access to, and (2) not have access to those records about Affected Individuals they should not. Several examples of how groups might be constructed to align with a facility's (or its designees') business operations are provided in the following section.

Common User Management Scenarios

EXAMPLE 1

A CFATS covered facility, ACME Chemical, has hired ABC Security to conduct background checks on Affected Individuals that are employees of ACME Chemical.

What needs to happen to have information about the Affected Individuals that are employees of ACME Chemical submitted under Option 1 or Option 2 by ABC Security?

ANSWER: In the CSAT PSP application, the ACME Chemical Authorizer needs to create a group for ABC Security, create a PSP Submitter role for one employee of ABC Security, and then associate the PSP Submitter to the ABC Security group. The PSP Submitter can then submit information about the Affected Individuals that are ACME Chemical employees via Option 1 or Option 2.

NOTE Affected Individuals submitted by ABC Security will automatically be added to the ABC Security group. The Authorizer, Administrators and PSP Submitters associated with the corporate group will be able to view but not edit records submitted by PSP Submitters in the ABC Security Group.

EXAMPLE 2

A corporation, which includes two CFATS-covered facilities, ACME Chemical and ACME Non-Traditional Chemical, has hired ABC Security to conduct background checks on Affected Individuals that are employees of the corporation. The corporation manages both CFATS covered facilities under a single Authorizer.

(?) What needs to happen to have the information of the Affected Individuals that are employees at either ACME Chemical or ACME Non-Traditional Chemical submitted under Option 1 or Option 2?

ANSWER: The Authorizer has two alternatives.

ALTERNATIVE 1

Create a single group, then create a PSP Submitter role for one employee of ABC Security and assign the ABC Security PSP Submitter to the group. The ABC Security PSP Submitter will be able to submit records about Affected Individuals from both facilities to the single group. This will allow information about Affected Individuals with access to either or both facilities to be submitted once.

ALTERNATIVE 2

Create two groups, then create an ABC Security PSP Submitter and associate it with the first group. Next, create a second PSP Submitter role and associate it with the second group. ABC Security can then use the different user roles to submit information about Affected Individuals to each respective group. This may result in some Affected Individuals' information being submitted more than once but may align more closely with existing access control or background check processes already in place between each facility and its contractor.

EXAMPLE 3

ABC Security has been hired to conduct background checks on Affected Individuals at two separate CFATS-covered facilities (i.e., ACME Chemical and XYZ Chemical). The CFATS covered facilities are organized under different Authorizers within CSAT. Some Affected Individuals have access to both CFATS-covered facilities.

(?) What needs to happen to have information about the Affected Individuals submitted correctly?

ANSWER: The Authorizers for ACME Chemical and XYZ Chemical will each need to create a group for ABC Security. Following the creation of the groups, the Authorizers for each facility will need to assign an employee(s) of ABC Security the PSP Submitter role for their respective group. Authorizers should consult with ABC Security to determine if employees of ABC Security already have existing PSP Submitter user roles. If an Affected Individual has access to both covered facilities, the PSP Submitter for ABC Security will submit information about the Affected Individual twice, once on behalf of each facility. To accomplish this, ABC Security, using one of the PSP Submitter user roles, will need to login and submit information about the Affected Individual under the applicable option (Option 1 or Option 2). ABC Security can then either logout and then login under the other PSP Submitter user role or, if during registration the ABC Security PSP Submitter was registered as an existing CSAT user, the user can switch between authorizers using the 'Switch Authorizers' link that appears in the top right corner of the CSAT PSP application.

EXAMPLE 4

A CFATS covered facility, ACME Chemical, has multiple contracts with different companies (e.g., Landscape Inc. and Security Patrol Inc.). Each company providing a contracted service may employ people that meet the criteria as Affected Individuals, in accordance with ACME Chemical's SSP or ASP.

(?) What needs to happen to have information about the Affected Individuals that are employees of Landscape Inc. and employees of Security Patrol Inc. submitted under Option 1 or Option 2?

ANSWER: The Authorizer for ACME Chemical has two alternatives for submitting information about Affected Individuals that are employees of Landscape Inc. and employees of Security Patrol Inc.

ALTERNATIVE 1

➤ The Authorizer (or a PSP Submitter employed by ACME Chemical who is a member of the default group) may submit information about all Affected Individuals that are employees of Landscape Inc. and Security Patrol Inc. group. This option will render all submissions into the default group.

ALTERNATIVE 2

➤ The Authorizer may create groups for both Landscape Inc. and Security Patrol Inc. Following the creation of these groups, the Authorizer will need to (1) create PSP Submitter accounts for both Landscape Inc. and Security Patrol Inc. and (2) associate the PSP Submitter for Landscape Inc. and the PSP Submitter for Security Patrol Inc. with their respective group. The PSP Submitters for Landscape Inc. and Security Patrol Inc. will then be able to submit information about Affected Individuals from their respective

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companies without viewing the sensitive PII of each other's employees.

NOTE The Department encourages facilities to use alternative 2 rather than alternative 1 because it represents better privacy practices.

Appendix A

Locating the Agency Serial Number from a TWIC

Locating the TWIC Agency Serial Number from a TWIC issued before May 2014

The TWIC Agency Serial Number or Agency Serial Number (ASN) is displayed under the barcode on the back of the TWIC. It is composed of eight numeric characters. The ASN is also stored in the TWIC electronic chip as an element referred to as the Card Identification Number (CIN).

Using the example below, the number that would be input into the CSAT PSP application in the TWIC ASN data field is 00000392.

Figure 1: TWIC Agency Serial Number displayed on TWIC issued before May 2014

Locating the TWIC Agency Serial Number from a TWIC issued on or after May 2014

The TWIC Agency Serial Number or Agency Serial Number (ASN) is displayed under the barcode on the back of the TWIC. It is composed of eight numeric characters. The ASN is also stored in the TWIC electronic chip as an element referred to as the Card Identification Number (CIN).

Using the examples below, the number that would be input into the CSAT PSP application in the TWIC ASN data field is 01234567.

Figure 2: TWIC Agency Serial Number displayed on TWIC versions issued after May 2014

NOTE: TWIC issued after July 9, 2018 has additional security authentication features. The eight-digit CIN is embossed on the laminate of the new TWIC® card on the right-hand side of the facial photograph and includes an anchor design. As a security authentication feature, the CIN printed on the back of the card can be compared to the CIN embossed on the front of the card. Also, the CIN on the card front maintains a tactile validation capability allowing inspectors and security officials to physically feel the CIN in limited or low lighting conditions.

Electronically extracting the TWIC Agency Serial Number from a TWIC issued before or after May 2014

The Department expects that the TWIC Agency Serial Number inputted by a facility into CSAT has been authenticated either visually or electronically. Information about how to authenticate a TWIC can be found in the TWIC Authentication Guide available on the

U.S. Coast Guard's (USCG) Home Port site. A copy may also be obtained by contacting your Chemical Security Inspector.

When the TWIC Agency Serial Number is electronically extracted either from the embedded chip or bar code, the actual number extracted is the UCI Number. This is true of TWICs issued before and after May of 2014.

When read from the barcode, the full UCI is available as output from the barcode scanner as a single 16-digit number. The IIN (Tag 0x42) and the CIN (Tag 0x45) can be separately read from the chip and joined together to construct the UCI. Both IIN and CIN can be freely retrieved by issuing a GET DATA command after selecting the card manager (AID -0xA0000001510000) using their respective tags.

The UCI should be used when inputting data into the TWIC Agency Serial Number data field within the CSAT PSP application. For more information about how to electronically extract the UCI from TWICs, please refer to either (1) FIPS PUB 201-2, Personal Identity Verification (PIV) of Federal Employees and Contractors, August 2013, which can be found at http://www.nist.gov/manuscript-publicationsearch.cfm?pub_id=914530, or (2) the Global Platform Specification Version 2.2.1, January 2011, which can be found at https://www.globalplatform.org/specificationscard.asp.

Appendix B

Locating the Trusted Traveler Program PASSID

Figure 3: Trusted Traveler Program PASSID

Appendix C: Acronym and Abbreviation List

Acronym/Abbreviation	Description
ASN	Agency Serial Number
CDL	Commercial Driver's License
CFATS	Chemical Facility Anti-Terrorism Standards
CIN	Card Identification Number
CISA	Cybersecurity and Infrastructure Security Agency
CSAT	Chemical Security Assessment Tool
DHS	Department of Homeland Security
FAST	Free and Secure Trade
FR	Federal Register
GOES	Global Online Enrollment System
HME	Hazardous Materials Endorsement
IIN	Issuer Identification Number
PII	Personally Identifiable Information
PIV	Personal Identity Verification
PSP	Personnel Surety Program
RBPS	Risk-Based Performance Standards
SVA/ASP	Security Vulnerability Assessment/Alternative Security Program
SVA/SSP	Security Vulnerability Assessment/Site Security Plan
SENTRI	Secure Electronic Network for Travelers Rapid Inspection
TSC	Terrorist Screening Center
TSDB	Terrorist Screening Database
TWIC	Transportation Worker Identification Credential
UCI	Universal Credential Identification