



Client Information Sheet

Client Information :

HSS Partner : sdvff

Client Name : egwhtr

Street Address :

Street Address 2 :

City :

Province :

Zip Code :

Contact :

Phone :

Email :

Covered Entity :

Covered Entity Street Address :

Covered Entity Street Address 2 :

Covered Entity City :

Covered Entity State :

Covered Entity Zip Code :

Information security officer :

ISO Title :

ISO Email :

ISO Telephone :

IT Network Name :

Risk assessment report date :

Unique Project Identifier (UPI) :

Type of IT system :

System categorization :

System status :

System configuration :

Database :

Network server OS :

How many Servers :

How many Workstations :

How many laptops/tablets :

How many BYODs do you have :

What operating systems are in use:

Email:

Do you use Email? false

What Product(s) do you use?

Do you have an in-house email server?

Firewall:

Firewall Model :

Firewall S/N :

Firewall warranty status :

Firewall inbound/outbound Rule 1 :

Firewall inbound/outbound Rule 2 :

Firewall inbound/outbound Rule 3 :

Any VPN's (define) :

EMR:

What is the name of EMR :

Is the EMR hosted or running in-house :

Information Contacts :

No client contacts found

Internet connectivity :

ISP Name :

ISP account number :

Support contract number :

Connection type :

Static IP info :

Network IP :

Network Subnet :

Network gateway :

Network DNS1 :

Network DNS2 :

Interfaces :

No Interfaces found

Clearinghouse :

Clearing house :

contact number :

Interface connection type :