



ED Group & TFS Customs Broker, Inc.

Business Partner Security Survey

PLEASE CHECK PROPER ANSWER FOR EACH QUESTION, GIVE A BRIEF EXPLANATION, COMPLETE THE BOTTOM PORTION, & RETURN VIA E-MAIL TO uscompliance@edgroupchb.com

SECTION 1 VULNERABILITY ASSESSMENT

Company: _____

1. Are all of your buildings constructed of materials which resist unlawful entry and protect Against intrusion?

Yes No Does Not Apply

Give a brief description:

2. Do all of your buildings have adequate locking devices on external and internal doors and

adequate lighting inside and outside your facilities?

Yes No Does Not Apply

Give a brief description

3. Are all of your facilities enclosed by fencing?

Yes No Does Not Apply

Give a brief description:

4. Do you have alarm systems and video camera surveillance at all entrances to your facilities as well as receiving and loading docks?

Yes No Does Not Apply

Give a brief description:

5. Do you have 24 hour, 7 day per week security guards on the premises that man or monitor the gates through which vehicles/personnel enter and exit?

Yes No Does Not Apply

Give a brief description:

6. Do you have a procedure in place for affixing, replacing, recording, tracking and verifying seals on containers?

Yes No Does Not Apply

Give a brief description:

7. Do you have a proper storage area for empty and full containers to prevent unauthorized access?

Yes No Does Not Apply

Give a brief description:

8. Do you have procedures in place to properly mark, weigh, count and document products that you receive/ship and report any discrepancies?

Yes No Does Not Apply

Give a brief description:

9. Do you conduct employment screening and background checks on prospective employees and do you have a termination policy to remove identification, facility and system access?

Yes No Does Not Apply

Give a brief description:

10. Do you prohibit unauthorized access to your facilities and conveyances?

Yes No Does Not Apply

Give a brief description:

11. Do you require positive identification and tracking for all visitors, employees, and vendors?

Yes No Does Not Apply

Give a brief description:

12. Do you have procedures in place to challenge any unauthorized/unidentified persons that enter your facility?

Yes No Does Not Apply

Give a brief description:

13. Do you mark and segregate international product?

Yes No Does Not Apply

Give a brief description:

14. Do you have a designated security officer to supervise the introduction of cargo?

Yes No Does Not Apply

Give a brief description:

15. Do you conduct annual self assessments on security control issues? Yes

Yes No Does Not Apply

Give a brief description:

16. Does your automated systems use individually assigned accounts that require a periodic change of password?

Yes No Does Not Apply

Give a brief description:

17. Have you undergone a C-TPAT and/or Social Compliance audit within the last twelve months
Yes No Does Not Apply

Give a brief description:

18. Are you C-TPAT Certified or Validated with US Customs and Border Protection or any other security programs like BASC?

Yes No Does Not Apply

If so please provide your corresponding **SVI#** _____

Please list all security programs you belong to:

SECTION 2 THREAT ASSESSMENT

19. Has your company been involved in any Terrorism incident within the last 5 years?

Yes No Does Not Apply

Give a brief description:

20. Has your company been involved in any contraband smuggling incident within the last 5 years?

Yes No Does Not Apply

Give a brief description:

21. Has your company been involved in any human smuggling incident within the last 5 years?

Yes No Does Not Apply

Give a brief description:

22. Has your company been involved in any Organized Crime incident within the last 5 years?

Yes No Does Not Apply

Give a brief description:



COMPANY _____

NAME _____ & TITLE _____ DATE _____

