



WESTWAY

WORKPLACE LLC

I certify that I have reviewed the 3074 Centreville LLC/Westway Development Services LLC Security & Facility Briefing, as well as the Rules & Regulations, and that I understand and will comply with the requirements covered by the above-mentioned documents.

Printed Name _____

Company _____

Signature _____

Date _____

Suite/Seat # _____

SSN _____

Date of Birth _____

Place of Birth (City/County/State or Country) _____

Unclassified email address _____

Unclassified phone number _____

Occupational Specialty (Please circle the job title that most accurately matches your position)

Acquisition	Finance	Management Analysis
Administration	Human Resources	Operations
Compliance Oversight	Information Technology	Science
Contracting	Intelligence	Security
Engineering	Logistics	Systems Engineering

(This information is required in order for you to receive your PKI Certs from the NRO. Additionally, if your SCI tickets are held by NRO, you must also state the Directorate AND Sub-Directorate at NRO for which your contract supports.)

Directorate _____

Sub-Directorate _____

For Security Use Only

Date _____ **Badge Type** _____

Badge ID _____

Westway CWAN Information System Account Request (ISAR) Form

Complete all Fields

Step 1 – Requester Information

Requester's Last Name:	First Name:	Middle Initial:
Phone #:	Date:	Type: <input type="checkbox"/> Westway Employee <input checked="" type="checkbox"/> Westway Tenant/Contractor
Tenant/Company:		Tenant/Company Approver:

Step 2 – Enter Type of Account(s) Required

Check and Name All Accounts Needed – All Accounts Must be For Same Program

<input type="checkbox"/> Windows Workstation/Network	Name: _____
<input type="checkbox"/> UNIX/Linux Workstation/Network	Name: _____
<input type="checkbox"/> Application (Oracle, etc.)	Name: _____

Step 3 – Enter Group/Shared Account Membership Required (if applicable)

Windows Group(s): _____

UNIX/Linux Group(s): _____

Application Group(s): _____

Step 4 – Enter Acknowledgement of System Account Responsibilities

By signing below, the requester certifies that they have a mission-essential need for a system user account on the above-listed system(s)/network(s) and that they will be required to provide justification for continued access on an annual basis. Additionally, the requester agrees to adhere to all applicable Program Security Classification Guidance, System Security Plan (SSP), and other Government and Company policies and directives related to information systems usage.

Requester: _____ Signature _____ Date _____
Printed Name

Step 5 – Director/Program Manager Approval

Director/PM: _____ Signature _____ Date _____
Printed Name

>>>>If All Above Steps are Completed, Submit to CPSO/ISSM/ISSO for Processing<<<<

Step 6 – CPSO/ISSM/ISSO Acknowledgement and Briefing

By signing below, the CPSO/ISSM/ISSO confirms that the requester has the required clearance level, access, and need-to-know for the above-listed system(s)/network(s) and that the user has been briefed.

ISSO/ISSM: Donna McCarty/Norman Stachowicz Signature _____ Date _____
Printed Name

Step 7 – IT Support Acknowledgement & Account Creation

Account(s) created on: _____

Account(s) user id(s): _____

Account(s) created by: Terrence Wilburn Signature _____ Date _____
Printed Name



CWAN General User Responsibility Statement

Program Management in conjunction with Information Security, has determined that based on your job function and responsibilities you are being granted General User access which is defined as any user who can receive information from, input information to, or modify information on a system without a reliable human review. Failure to comply with all rules and regulations pertaining to any Corporate or Government furnished Information System (IS) constitutes a security violation and may result in the loss of systems privileges, loss of employment, and or result in criminal prosecution. The following is derived from requirements specified in the Intelligence Community Directive (ICD) 503-Information Technology System Security Risk Management, Certification and Accreditation, Protecting Sensitive Compartmented Information (SCI) within Information Systems, applicable Government Sponsor Directives and Instructions, ND 100-28 and 3074 Centreville LLC/Westway Development Services LLC acceptable use policy.

Responsibilities and Requirements of a General User:

1. I will protect and safeguard information in accordance with the System Security Plan (SSP), Sponsor Directives, Instructions, and applicable Security Classification Guides. **I will only store, print and process SI/TK information on the Westway CWAN.**
2. I will access only the data, software, hardware, and firmware for which I have approval and a valid need-to-know, and will assume only the roles and privileges for which I am authorized.
3. I will NOT bypass, strain, or test security mechanisms. If security mechanisms must be bypassed for any reason I shall coordinate the procedure with the ISSO and receive permission from the ISSM.
4. I will immediately report all security incidents and potential threats and vulnerabilities involving an IS to the appropriate ISSO, ISSM, and CPSO.
5. I will protect terminals/workstations from unauthorized access, i.e. protect all data viewed on the screens and or outputs produced at the level of system processing until it has been reviewed, lock my workstation when unattended, and logoff at the-end-of-day.
6. I will NOT introduce or use unauthorized software, firmware, or hardware on an IS.
7. I will NOT use privately owned equipment, software and media to process, access or store sensitive information. Privately owned equipment shall not be connected to sensitive/classified 3074 Centreville LLC/Westway Development Services LLC systems and networks.
8. I will NOT introduce malicious code into my IS or physically damage the system.
9. I will NOT relocate or change IS equipment, VoIP phone, or the network connectivity of IS equipment without security authorization.
10. I will adhere to the following requirements regarding Password Management.
 - a. I will generate a 'strong' password comprised of a minimum of 12 characters. All passwords shall contain a combination of at least two (2) upper-case alphabetic (A-Z), two (2) lower-case alphabetic (a-z), two (2) numeric characters (0-9), and/or two (2) punctuation or special characters (e.g. @#\$%, etc.) to the extent the system allows.
 - b. I will protect system passwords commensurate with the level of information processed on the system and will never disclose to anyone else regardless of the situation.
 - c. I acknowledge that my password shall not be constructed by using personal information or words found in a dictionary. Examples of personal information include a spouse's name, children's names, automobile license plate, social security number, birthday, etc.
 - d. I will be required to change my password every 180 days and not reuse any of the previous twenty-four (24) passwords.
 - e. If I have access to a Group account, I will first login with my personal user ID prior to accessing the Group account.
 - f. Five (5) consecutive unsuccessful attempts to log onto an IS shall suspend or disable the account for fifteen minutes.
11. I will adhere to the following requirements regarding Media Device Access (MDA) briefing.
 - a. If my job requires that I have access to any removable media drive on a classified system, I will first obtain authorization from the ISSM/Information Security and receive the Media Device Access (MDA) briefing.
 - b. I will protect all media in a SCIF areas by properly classifying, labeling, controlling, moving, transmitting, storing, and destroying in accordance with Information Security policies, requirements, and applicable security classification guide(s).
 - c. I will ensure that all files and media are check for viruses and malicious code by using a Company-provided Anti-Virus (AV) software application prior to installation on my IS.
12. If I am required to output unclassified or lower classified media I will perform this in accordance with the trusted Download Review (TDR) Standard Operating Procedure (SOP) and obtain Program Manager and ISSM/Information Security approval.
13. I will comply with the Software Review Request (SSR) process as well as copyright laws and licensing agreements.
14. I understand and will comply with the 3074 Centreville LLC/Westway Development Services LLC Contractor Local Area Network (CWAN) security policies and procedures.
15. I will only use the system for performing assigned company duties, never personal business.
16. I will notify the ISSM/Information Security when I no longer have a need to access the system (i.e. termination, leave-of-absence, or for any period of extended non-use).
17. In using a 3074 Centreville LLC/Westway Development Services LLC or Government furnished IS, I understand I have neither the right nor expectation of privacy and I consent to monitoring, interception, recording, reading, copying, or capturing of all activities by authorized personnel.
18. I understand that I must log on every 60 Days or my account will be disabled and after 180 days my account will be deleted.

By signing below, you are acknowledging that you have read and understand your role and responsibilities as a General User.

User Name (1st Initial/Full Last Name):

Signature:

Date:

ISSM/ISSO/CPSO:

Signature:

Date:

Donna McCarty/Norman Stachowicz



3074 Centreville Road, Suite 100
Herndon, Virginia 20171

FITNESS CENTER

Introduction

The fitness center is equipped with treadmills, elliptical trainers, strength trainers, multi-station pulley system, super bench, multi-purpose bench, barbell and dumbbell racks. Televisions are available at all cardio equipment stations and personal headphones are required.

The fitness center is an unattended facility with access readily available for authorized occupants via the access control system. To gain authorized use of the facility, the attached waiver of liability will need to be executed and submitted to security. Upon receipt of the completed form, your badge will then be programmed for access and you may begin enjoying its benefits.

It is very important that each person observe the below rules and regulations, which have been designed to provide a safe and enjoyable environment for all tenants. Non-adherence to the rules and regulations will result in privileges being suspended.

Rules and Regulations

Use

All tenants of Westway Workplace shall use the facility and related equipment solely for weight and cardiovascular training on the equipment provided. No person may use the Center unless they have signed a waiver of Liability. This center is open for tenants only. Guests are not authorized to use the center.

Hours of Operation

In order to accommodate thorough cleaning of the facility on a daily basis, the fitness center may be used during the following hours of operation (excluding all Federal holidays):

Monday-Friday 6:00a.m. to 6:00p.m (Closed 9:30-10:30a.m. for cleaning)
Saturday 9:00 a.m. to 1:00 p.m.

Access

Access is granted with the use of your assigned facility access badge and coded for entry upon execution of the Waiver of Liability.

Conduct

Conduct, which unreasonably interferes with the use or enjoyment of the center or the equipment by other tenants, or disrupts or interferes with the normal, safe, orderly and efficient operation of the center or the equipment is strictly prohibited. Radios or similar audio equipment may not be used without headphones.

Identification

All tenants must upon request by building management or security, present their assigned facility access badge for identification purposes. Management assumes no responsibility for lost or stolen access cards.

Food & Drinks

Other than water, food and beverages shall not be consumed in the fitness facility. Alcoholic beverages are strictly prohibited.

Suggestions

Tenants must immediately notify building management, located in suite 100, in the event they discover hazardous conditions, defective equipment, fire, or disorder within the facility. Suggestions are always welcome and can also be submitted to building management.

Other Facilities

Lockers, showers, and restrooms are provided. Towels, soap, shampoo, and other miscellaneous health and beauty items are not provided. The Managing Agent may prohibit use or close this center if misused in any way. The Landlord and its Managing Agent take no responsibility for personal possessions left in this facility. **Locks on lockers are permissible, however all articles and locks must be removed when leaving the fitness center after workout/exercise is completed. Items must be stored at your workstation or in your vehicle. Personal items may not be stored, and clothing items may not be "air-dried", in exterior or interior common areas of the building; to include seating areas and the parking lot.** The Landlord and its Managing Agent reserves the right to remove any locks on lockers and any items that are left/displayed in the common areas.

Violations

Repeated failure or refusal to comply with these rules and regulations may result in the loss of fitness center privileges.

Maintenance

No person shall leave any litter, trash, debris, articles of clothing, or other personal property at the center.

Our cleaning staff will be performing regular scheduled cleaning of the locker/shower rooms and equipment each day between the hours of 9:30-10:30 am. As a courtesy to others, please wipe down the equipment after each use and be sure to pick up after yourself in the shower room(s). This will assure the fitness center is ready for use each day for your use.



Waiver of Liability

In order to use the exercise and weight training facilities and equipment located at 3074 Centreville Road, Herndon, Virginia 20171 and in consideration thereof, I hereby certify, covenant, and agree as follows:

1. I am in good physical condition and am able to use the facilities and equipment and to participate in exercise and fitness activities available at the above location. I will exercise and participate in all activities at my own pace and at my own risk.
2. I understand that 3074 Centreville LLC and Westway Workplace LLC does not represent that its employees, personnel or agents have expertise in diagnosing, examining or treating medical conditions of any kind, or determining the effect of any specific exercise, or prescribing any exercise program or instructing in the use of any exercise equipment.
3. I understand that in participating in one or more exercises or fitness activities at the facility or in use of the equipment or the facility, there is a possibility of accidental or other physical injury or loss of my personal property. I AGREE TO ASSUME THAT RISK OF SUCH INJURY OR LOSS OF PROPERTY, AND RELEASE, INDEMNIFY, DEFEND AND HOLD HARMLESS 3074 CENTREVILLE LLC, WESTWAY WORKPLACE LLC, AND ANY OFFICERS, DIRECTORS, SHAREHOLDERS, PARTNERS, EMPLOYEES, PERSONNEL OR AGENTS THEREOF, FROM LIABILITY FOR ANY AND ALL INJURY, LOSS, ILLNESS, HARM OR DAMAGE RESULTING FROM MY USE OF THE FACILITY OR THE EQUIPMENT.
4. I acknowledge that I have received and read a copy of the Rules and Regulations governing the use and hours of operation of the facility and equipment. I agree that I will fully comply with the Rules and Regulations as they are amended from time to time. _____

Initials

Employer

Name (please print)

Suite and Cubicle #

Signature

Phone Number

Date

Access Card Number

E-mail Address

All executed liability waivers may be forwarded via email at 3074Security@westwaywp.com for processing. Once received your application will be processed for access to the fitness center with the use of the Westway badge.