



Preliminary Certification Questionnaire

Entity Legal Name (NCR Number)			
Entity Acronym		Date	Click or tap to enter a date.
Applicable Registered Function(s):	<input type="checkbox"/> Balancing Authority (BA) <input type="checkbox"/> Transmission Operator (TOP) <input type="checkbox"/> Reliability Coordinator (RC) (Check all that apply.)		
<p style="text-align: center;">Triggering Event¹ (Check all the apply):</p> <p><input type="checkbox"/> Changes to a Registered Entity’s footprint (This includes changes in ownership of BES Facilities, changes in the applicability of the BES Definition to a Facility, and newly installed BES Facilities.) and may include changes (expansion or contraction of responsibilities) to existing JRO/CFR assignments or sub-set list of requirements.</p> <p><input type="checkbox"/> Construction and/or relocation of the control center (Primary and/or Back-Up) which impacts the functionality provided within these facilities for continued reliable operations of the BES that include but are not limited to the following:</p> <ul style="list-style-type: none"> • Tools and applications that System Operators use for situational awareness of the BES • Data exchange capabilities • Interpersonal (and alternate) Communications capabilities • Power source(s) • Physical and cyber security <p><input type="checkbox"/> Modification of the Energy Management System (EMS) which is expected to materially affect CIP security perimeters or the System Operator’s: 1) situational awareness tools, 2) functionality, or 3) machine interfaces.</p> <p><input type="checkbox"/> Other (Please describe):</p> <p>Click here to enter text.</p>			

¹ NERC Rules of Procedure, Appendix 5A Organization Registration and Certification Manual (Effective Date: January 19, 2021), Section V, Parts a - c.



In order to determine the scope and type of Certification engagement needed, please provide your answers to the General Questions below.

1. Please provide your entity's characteristics including size, geographic service territory, and registered function(s) under the NERC Compliance Registry, etc.

[Click here to enter text.](#)

2. Has MRO received written notification of these changes (or an application) from your entity?

[Click here to enter text.](#)

3. What is the expected completion date for this project?

[Click here to enter text.](#)

4. Please provide a general project timeline including major milestones and tentative completion dates.

[Click here to enter text.](#)

5. Is there a need for training of System Operators, Cyber Security Professionals or other impacted personnel resulting from the 'triggering event'?

[Click here to enter text.](#)

6. Are there other entity specific or unique factors that you believe should be considered in determining the need for a Certification Review?

[Click here to enter text.](#)

In addition to the General Questions, if the 'triggering event' is a 'Change to the Registered Entity's footprint', please answer the following:

1. Describe the changes to your 'footprint'.

[Click here to enter text.](#)

2. Will the changes to your 'footprint' result in any modifications/updates to the Energy Management System (EMS) in relation to:

- a. Tools and applications that System Operators use for situational awareness of the BES, and/or
- b. Data exchange capabilities.

[Click here to enter text.](#)



3. Has the 'footprint' change impacted the Physical Security Perimeter (PSP) or Electronic Security Perimeter (ESP) of existing or newly acquired facilities, including related access procedures (both logical and physical), physical security plan, the addition of card key readers, fencing, alarms or cameras?

[Click here to enter text.](#)

In addition to the General Questions, if the 'triggering event' is a 'Construction and/or relocation of the control center (Primary and/or Back-Up)', please answer the following:

1. Describe how your entity currently achieves Primary and Backup Control Center functionality.

[Click here to enter text.](#)

2. How will the transition between the current functionality and the new Control Center(s) be addressed?

[Click here to enter text.](#)

3. Describe the changes for the current Primary Control Center or Backup Control Center when the new Control Center is operable.

[Click here to enter text.](#)

4. Please describe whether this change will include upgrades or new system installation of any BES cyber systems, assets or storage areas.

[Click here to enter text.](#)

5. Has the construction and/or relocation of the control center (Primary and/or Back-Up) impacted the Physical Security Perimeter (PSP) or Electronic Security Perimeter (ESP) of existing or new facilities, including related access procedures (both logical and physical), physical security plan, the addition of card key readers, fencing, alarms or cameras?

[Click here to enter text.](#)

In addition to the General Questions, if the 'triggering event' is a 'Modification of the Energy Management System (EMS)', please answer the following:

1. Please describe the Energy Management System (EMS) (software and/or hardware) replacement, upgrade and/or virtualization. Please include whether the change will include a change in Vendor.

[Click here to enter text.](#)



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2. Will the modification of the EMS result in changes to the Physical Access Control System (PACS), Physical Security Perimeter (PSP), Electronic Security Perimeter (ESP), physical or logical access control procedures or alarms?

Click here to enter text.

3. Will the modification of the EMS impact existing Technical Feasible Exceptions (TFEs)?

Click here to enter text.

4. Will the modification of the EMS result in changes to the System Recovery Plans or responder 'roles'?

Click here to enter text.

5. Will the modification of the EMS impact the current patch management process or require Active Vulnerability Assessments to be conducted?

Click here to enter text.

Note: Be prepared to provide copies of any revised documentation including respective policies, procedures, PSP and ESP diagrams, reflecting the changes associated with the 'triggering event'.

This form should be submitted via e-mail to Certification@mro.net

For questions about Registration or Certification, please contact **Summer Stephens, Summer.Stephens@mro.net**

To upload CEII documents please contact **Rebecca Schneider, Rebecca.Schneider@mro.net**

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