

## Information Technology Questionnaire Money Services Business License Application

### Instructions

- Please answer all questions below. Most questions are of the “Yes”, “No”, “Not Applicable” category; however, a “Comments” section is provided under each major heading to expand or clarify your responses. All “No” or “Not Applicable” responses require a comment response indicating the reason(s) for the negative or non-applicability response.
- Please enter the name of the individual completing this questionnaire. Further, the questionnaire must be signed by an executive officer of the applicant and notarized.

Preparer Name & Title: \_\_\_\_\_

Executive Officer’s Name & Title: \_\_\_\_\_

Applicant Name & Location: \_\_\_\_\_

Date Questionnaire Fully Completed: \_\_\_\_\_

- If insufficient space is available to respond to “Comments” below, please attach additional sheets.
1. Has applicant implemented a comprehensive, enterprise-wide, disaster recovery / business continuity program (DR/BCP)  Yes  No  NA
- If yes, does the DR/BCP contain:
- a. Defined roles & responsibilities?  Yes  No  NA
  - b. Written recovery procedures?  Yes  No  NA
  - c. Does applicant obtain a Service Organizational Control (SOC) 1 or similar audit?  Yes  No  NA
  - d. Does applicant obtain a SOC 2 or similar audit?  Yes  No  NA
  - e. Business impact analysis?  Yes  No  NA
  - f. Offsite storage provisions?  Yes  No  NA
  - g. Testing requirements, including documentation of lessons learned from DR/BCP tests?  Yes  No  NA

Comments:

---

---

---

2. Does applicant have an incident response plan?  Yes  No  NA

If yes, does the plan provide for:

- a. Assessing the nature & scope of the incident, including documenting any systems containing customer information that may have been compromised?  Yes  No  NA
- b. Containing & controlling the incident to prevent further compromise?  Yes  No  NA
- c. Contacting appropriate law enforcement and regulatory representatives?  Yes  No  NA
- d. Preserving records and other evidence?  Yes  No  NA
- e. Customer notification?  Yes  No  NA
- f. Periodic employee awareness training?  Yes  No  NA

Comments:

---

---

---

3. Has applicant implemented an internal audit program?  Yes  No  NA

If yes, does the scope of the internal audit program include:

- a. Network security?  Yes  No  NA
- b. General IT-related controls?  Yes  No  NA
- c. Penetration testing?  Yes  No  NA
- d. Application development policies & procedures?  Yes  No  NA
- e. Disaster recovery / business continuity planning?  Yes  No  NA
- f. Information security program?  Yes  No  NA
- g. Compliance with applicable safeguarding customer information regulations?  Yes  No  NA

Comments:

---

---

---

4. External audit details:

Audits done within the last 36 months:

Audit Firm Name: \_\_\_\_\_

City, State: \_\_\_\_\_

Audit Type: \_\_\_\_\_

Audit Date: \_\_\_\_\_

Audit Firm Name: \_\_\_\_\_

City, State: \_\_\_\_\_

Audit Type: \_\_\_\_\_

Audit Date: \_\_\_\_\_

Audit Firm Name: \_\_\_\_\_

City, State: \_\_\_\_\_

Audit Type: \_\_\_\_\_

Audit Date: \_\_\_\_\_

Audit Firm Name: \_\_\_\_\_

City, State: \_\_\_\_\_

Audit Type: \_\_\_\_\_

Audit Date: \_\_\_\_\_

Comments:

---

---

---

5 Has applicant implemented an information security program (ISP) to protect non-public information?  Yes  No  NA

If yes, does the ISP include:

a. Written policies & procedures?  Yes  No  NA

b. Employee training?  Yes  No  NA

c. Monitoring?  Yes  No  NA

- d. Security at both the applicant and, if applicable, significant service providers?  Yes  No  NA
- e. Logical & physical security considerations?  Yes  No  NA
- f. Provisions for testing the effectiveness of key controls through some type of audit, test, review, etc.?  Yes  No  NA
- g. Provisions for adjusting the program?  Yes  No  NA

Comments:

---



---



---

6. Has applicant implemented an ISP with respect to its application server infrastructure and controls?  Yes  No  NA

If yes, does the ISP include:

- a. Security check of any internal application servers which contain customer information or critical data is stored, processed, or transmitted?  Yes  No  NA
- b. Does the security check test for internal application servers' vulnerabilities?  Yes  No  NA
- c. Does the security check test for internal application servers validating appropriate access controls?  Yes  No  NA
- d. Does the security check test for internal application servers provide for penetration testing?  Yes  No  NA

Comments:

---



---



---

7. Has applicant implemented an ISP with respect to its website and associated web application security?  Yes  No  NA

If yes, does the ISP include:

- a. Written policies & procedures?  Yes  No  NA
- b. Monitoring?  Yes  No  NA
- c. Provisions for adjusting the program?  Yes  No  NA

- d. Security evaluation of the public facing website and web applications on which customer information is kept, processed, or transmitted?  Yes  No  NA
- e. Is security tested for vulnerabilities?  Yes  No  NA
- f. Is security tested for access controls?  Yes  No  NA
- g. Does security testing include penetration testing?  Yes  No  NA

Comments:

---



---



---

- 8. Has applicant implemented an ISP with respect to its Virtual Currency wallet infrastructure and controls?  Yes  No  NA

If yes, does the ISP include:

- a. Security over the virtual and physical Infrastructure in which virtual currency is kept for the applicant and customers?  Yes  No  NA
- b. Do virtual controls include passwords, encryption, and split keys?  Yes  No  NA
- c. Are private keys ever stored unencrypted?  Yes  No  NA

Comments:

---



---



---

- 9. Does applicant rely on delegates or offices to conduct business activities?  Yes  No  NA

If yes, is access granted:

- a. Based on defined security policies/procedures?  Yes  No  NA
- b. Based on 2 or more factor authentication?  Yes  No  NA
- c. Logged and routinely monitored?  Yes  No  NA

Comments:

---

---

---

10. Does the applicant develop or support custom software that is used for conducting daily business activities? [Note: this item is not applicable to MSB's whose applications are developed by a third-party contractor.]  Yes  No  NA

If yes, are development/support activities:

- a. Based on written policies & procedures?  Yes  No  NA
- b. Properly segregated? (e.g. development from production, documentation, production release controls, and pre-release testing.)  Yes  No  NA
- c. Based on secure program coding practices that meet industry standards?  Yes  No  NA
- d. Based on an assessment of the applicant's system and application development methodology?  Yes  No  NA
- e. Subject to independent review and testing to ensure there are no security and integrity issues prior to migration to a production environment?  Yes  No  NA

Comments:

---

---

---

Any Additional Comments Pertaining to Any of the Information Technology Issues Noted in 1-10 above?

---

---

---

---

---

I hereby certify under penalty of perjury that the information contained in the Information Technology Questionnaire signed by me is correct and complete and that there is no misrepresentation or omission of material fact.

Dated and signed on \_\_\_\_\_.

\_\_\_\_\_

(Signature of Affiant)

\_\_\_\_\_

(Name of Affiant)

**STATE OF TEXAS**

**COUNTY OF** \_\_\_\_\_

Personally appeared before me the above named Affiant, \_\_\_\_\_,  
personally known to me, who, being duly sworn, deposes and says that he/she executed the above  
instrument and that the statements and answers contained therein are true and correct.

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_

(Notary Public)

(Seal)

My Commission expires: \_\_\_\_\_