

VULNERABILITY ASSESSMENT AND PENETRATION TESTING
STPI-Gandhinagar

VAPT Requirement Form

Customer Name :															
Address :															
Contact person :															
Telephone no. :	Fax no. :	E-mail :	Web site :												
<p>Standards the company is already certified to: <input type="checkbox"/> ISO 9001 <input type="checkbox"/> ISO 27001</p> <p>SCOPE OF TESTING <input type="checkbox"/> REMOTE <input type="checkbox"/> ON SITE</p> <p>DESCRIPTION OF NETWORK COVERAGE E.g. <i>Internet facing network infrastructure and servers rendering business process services, mail services, financial transactions, and web and application servers.</i></p> <p>TYPE OF VAPT THAT CAN BE UNDERTAKEN</p> <ul style="list-style-type: none"><input type="checkbox"/> Remote Network Vulnerability Assessment and Penetration Testing (internet routable)<input type="checkbox"/> Internal Network Vulnerability Assessment and Penetration Testing<input type="checkbox"/> Web Application Penetration Testing<input type="checkbox"/> Server configuration reviews<input type="checkbox"/> Password audits<input type="checkbox"/> Patch audit <p>PERIODICITY <input type="checkbox"/> ONE TIME <input type="checkbox"/> QUARTERLY <input type="checkbox"/> HALF YEARLY <input type="checkbox"/> ANNUALLY</p> <p>OTHER PEN TEST TO BE PERFORMED DENIAL OF SERVICE <input type="checkbox"/> YES <input type="checkbox"/> NO</p>															
<p>Applicable Regulatory requirements (only for Information)</p> <table style="width: 100%;"><tr><td><input type="checkbox"/> ISO 27001</td><td><input type="checkbox"/> PCI / DSS</td><td><input type="checkbox"/> HIPAA</td><td><input type="checkbox"/> GLBA</td></tr><tr><td><input type="checkbox"/> IT ACT</td><td><input type="checkbox"/> NERC CIP</td><td><input type="checkbox"/> Cyber Law</td><td><input type="checkbox"/> Data Protection Act</td></tr><tr><td colspan="4"><input type="checkbox"/> Others specify</td></tr></table>				<input type="checkbox"/> ISO 27001	<input type="checkbox"/> PCI / DSS	<input type="checkbox"/> HIPAA	<input type="checkbox"/> GLBA	<input type="checkbox"/> IT ACT	<input type="checkbox"/> NERC CIP	<input type="checkbox"/> Cyber Law	<input type="checkbox"/> Data Protection Act	<input type="checkbox"/> Others specify			
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<p>Remote Network Vulnerability Assessment and Penetration Testing</p> <ul style="list-style-type: none">• Number of IP addresses in target space and IP addresses :• Number of live hosts :• Number of Web Applications :															

IT Assets to be covered
(Or attach a network diagram)
Not required for black box testing

- ☐ **Perimeter**
- ☐ Firewall
 - ☐ VPN
 - ☐ Remote access servers
 - ☐ Proxy servers

- ☐ **Network**
- ☐ Router
 - ☐ Switch
 - ☐ Hubs and concentrators
 - ☐ Wireless access points
 - ☐ WAN components, modems, ISDN devices etc

- ☐ **Servers**
- ☐ Application Servers
 - ☐ Web Server
 - ☐ Mail Server
 - ☐ DNS Server
 - ☐ Database server

- ☐ **Software**
- ☐ Web application
 - ☐ Standard applications
 - ☐ Custom application

Internal Network ☐ **Vulnerability Assessment** ☐ **Penetration Testing**

- Number of servers in target space :
- Number of network devices in target space :
- Number of desktops in target space :

Server Configuration Reviews

- Number and type (operating system and function) of servers to be reviewed :

Web Application Assessment :

Application Description :
(i.e. Purpose, objectives & Scope of the software application)

Web Application Nomenclature, Version & Release Date :

No. of Dynamic Pages :

No. of Static Pages :

No. of Fields available for user input :

Number of forms available for user input :

Staging/Temporary URL for testing :

Operating System :
(e.g. Windows 2016, Linux etc)

Web/Application Server with version :
(e.g. IIS, Apache, Tomcat etc.)

Server side scripts :
(e.g. asp, jsp, php etc.)

Database at backend :
(Oracle, MS SQL, MySQL etc.)

**Total Size of the Website in MB or
in no. of pages** :

Any special request (timings of testing)

Any On site assessments expected :

We, DECLARE THAT THE IP ADDRESS AS INDICATED ABOVE IS UNDER OUR OWNERSHIP (AS EVIDENCED)

Name:

Position:

Signature

Date: