

Section 1: Assessment Information

Instructions for Submission

This document must be completed as a declaration of the results of the merchant's self-assessment with the *Payment Card Industry Data Security Standard Requirements and Security Assessment Procedures (PCI DSS)*. Complete all sections: The merchant is responsible for ensuring that each section is completed by the relevant parties, as applicable. Contact acquirer (merchant bank) or the payment brands to determine reporting and submission procedures.

Part 1. Merchant and Qualified Security Assessor Information

Part 1a. Merchant Organization Information

| | | | | | |
|-------------------|--|----------|--|--------------------------|--|
| Company Name: | | | | DBA (doing business as): | |
| Contact Name: | | Title: | | | |
| Telephone: | | E-mail: | | | |
| Business Address: | | City: | | | |
| State/Province: | | Country: | | Zip: | |
| URL: | | | | | |

Part 1b. Qualified Security Assessor Company Information (if applicable)

| | | | | | |
|------------------------|--|----------|--|------|--|
| Company Name: | | | | | |
| Lead QSA Contact Name: | | Title: | | | |
| Telephone: | | E-mail: | | | |
| Business Address: | | City: | | | |
| State/Province: | | Country: | | Zip: | |
| URL: | | | | | |

Part 2. Executive Summary

Part 2a. Type of Merchant Business (check all that apply)

| | | |
|---|--|--|
| <input type="checkbox"/> Retailer | <input type="checkbox"/> Telecommunication | <input type="checkbox"/> Grocery and Supermarkets |
| <input type="checkbox"/> Petroleum | <input type="checkbox"/> E-Commerce | <input type="checkbox"/> Mail order/telephone order (MOTO) |
| <input type="checkbox"/> Others (please specify): | | |

| | |
|--|--|
| What types of payment channels does your business serve? | Which payment channels are covered by this SAQ? |
| <input type="checkbox"/> Mail order/telephone order (MOTO) | <input type="checkbox"/> Mail order/telephone order (MOTO) |
| <input type="checkbox"/> E-Commerce | <input type="checkbox"/> E-Commerce |
| <input type="checkbox"/> Card-present (face-to-face) | <input type="checkbox"/> Card-present (face-to-face) |

Note: If your organization has a payment channel or process that is not covered by this SAQ, consult your acquirer or payment brand about validation for the other channels.

Part 2b. Description of Payment Card Business

How and in what capacity does your business store, process and/or transmit cardholder data?

Part 2c. Locations

List types of facilities and a summary of locations (for example, retail outlets, corporate offices, data centers, call centers, etc.) included in the PCI DSS review.

| Type of facility | Number of facilities of this type | Location(s) of facility (e.g. city, country) |
|-------------------------|-----------------------------------|--|
| Example: Retail outlets | 3 | Boston, MA, USA |
| | | |
| | | |
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Part 2d. Payment Application

Does the organization use one or more Payment Applications? ☐ Yes ☐ No

Provide the following information regarding the Payment Applications your organization uses:

| Payment Application Name | Version Number | Application Vendor | Is application PA-DSS Listed? | PA-DSS Listing Expiry date (if applicable) |
|--------------------------|----------------|--------------------|--|--|
| | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |

Part 2e. Description of Environment

Provide a **high-level** description of the environment covered by this assessment.

For example:

- Connections into and out of the cardholder data environment (CDE).
- Critical system components within the CDE, such as POS devices, databases, web servers, etc., and any other necessary payment components, as applicable.

Does your business use network segmentation to affect the scope of your PCI DSS environment?

(Refer to "Network Segmentation" section of PCI DSS for guidance on network segmentation)

☐ Yes ☐ No

Part 3a. Acknowledgement of Status (continued)

- ☐ No evidence of full track data¹, CAV2, CVC2, CID, or CVV2 data², or PIN data³ storage after transaction authorization was found on ANY system reviewed during this assessment.
- ☐ ASV scans are being completed by the PCI SSC Approved Scanning Vendor (ASV Name)

Part 3b. Merchant Attestation

| | |
|--|---------------|
| <i>Signature of Merchant Executive Officer</i> ↗ | <i>Date:</i> |
| <i>Merchant Executive Officer Name:</i> | <i>Title:</i> |

Part 3c. Qualified Security Assessor (QSA) Acknowledgement (if applicable)

If a QSA was involved or assisted with this assessment, describe the role performed:

| | |
|--|---------------------|
| <i>Signature of Duly Authorized Officer of QSA Company</i> ↗ | <i>Date:</i> |
| <i>Duly Authorized Officer Name:</i> | <i>QSA Company:</i> |

Part 3d. Internal Security Assessor (ISA) Involvement (if applicable)

If an ISA(s) was involved or assisted with this assessment, identify the ISA personnel and describe the role performed:

| | |
|--|--|
| | |
|--|--|

¹ Data encoded in the magnetic stripe or equivalent data on a chip used for authorization during a card-present transaction. Entities may not retain full track data after transaction authorization. The only elements of track data that may be retained are primary account number (PAN), expiration date, and cardholder name.

² The three- or four-digit value printed by the signature panel or on the face of a payment card used to verify card-not-present transactions.

³ Personal identification number entered by cardholder during a card-present transaction, and/or encrypted PIN block present within the transaction message.