



Service Provider Risk Assessment

Questionnaire requested by FIELDS AUTO GROUP for BILL RUSSO

Bill Russo

Independent Contractor

10/02/25

Name of Person Completing This Questionnaire

Service Provider Name

Date Completed

1. Are you an employee or authorized representative of this vendor/company? Indicate the Person's Name in the comments.	☐ Yes ☐ No ☒ N/A	Person's Name:
2. Does your company offer software applications as part of its services?	☒ Yes ☐ No ☐ N/A	
3. Is client data encrypted at rest and in transit? If not, why not?	☒ Yes ☐ No ☐ N/A	
4. Has your company experienced a data breach in the past 12 months that affected customers' personal information?	☐ Yes ☒ No ☐ N/A	
5. Does your company have insurance coverage for a data breach that may involve our customer information that your company acquires while doing business with us?	☐ Yes ☒ No ☐ N/A	
6. Does your company require security awareness training for all employees? If so, please answer how often it is provided in the comments section.	☐ Yes ☐ No ☒ N/A	Security Training Frequency:
7. Does your company monitor for the effectiveness of employee security training by testing your users with simulated attacks?	☐ Yes ☐ No ☒ N/A	
8. Does your company have a process for restricting access to customer files on a need-to-know basis?	☒ Yes ☐ No ☐ N/A	
9. Do you have a written information security program?	☐ Yes ☒ No ☐ N/A	
10. Does your company conduct annual risk assessments that assess electronic, physical, and administrative information safeguards?	☐ Yes ☒ No ☐ N/A	
11. Does your company have systems in place to securely dispose of documents that have personal identifiable information on them?	☐ Yes ☐ No ☒ N/A	
12. Does your company have systems in place to restrict access to files/documents containing customers personal information to those with proper authorization?	☒ Yes ☐ No ☐ N/A	



Fields Auto Group Compliance

13. Does your company have due diligence processes and procedures for vetting subcontractors, including having them sign processing agreements that are compliant with applicable federal and state laws?	☒ Yes ☐ No ☐ N/A	
14. Has your company performed penetration testing of its systems within the past 12 months?	☐ Yes ☒ No ☐ N/A	
15. Has your company conducted a vulnerability assessment of your systems within the past 6 months?	☐ Yes ☒ No ☐ N/A	
16. Does your company maintain end-of-life or unsupported operating systems or software? If so, are these systems used to manage or maintain customer data?	☒ Yes ☐ No ☐ N/A	Not to manage customer data
17. Does your company regularly patch or update systems and third-party software and monitor for noncompliance?	☒ Yes ☐ No ☐ N/A	
18. Does your company have a written incident response plan in the event of a security breach?	☐ Yes ☒ No ☐ N/A	
19. Does your company require users to create complex passwords with 9 characters or greater?	☒ Yes ☐ No ☐ N/A	
20. Does your company prohibit shared logins?	☒ Yes ☐ No ☐ N/A	
20. Does your company prohibit shared logins?	☒ Yes ☐ No ☐ N/A	
22. Do you have an account lockout policy?	☒ Yes ☐ No ☐ N/A	

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Date

Signature of Authorized Agent of Service Provider

Title