

PRE-ACTIVITY QUESTIONNAIRE

This questionnaire is a part of the Intra-ASEAN Secure Transactions Implementation Workshop project. The project supports the ASEAN ICT Masterplan 2015, under Strategic Thrust 2, Initiative 2.4 promoting the secure transaction within ASEAN. The project aims to develop further the Intra-ASEAN Secure Transactions Framework by creating electronic transaction classification and recommendations for the Mutual Recognition Agreement model which includes common recognition criteria of foreign electronic signature and digital certificate among ASEAN Member States.

This worksheet follows the structure of *Risk Assessment Reference Framework for Electronic Authentication – Annex B* and aims to facilitate the assessment of level of assurance for a subject electronic service, which specifically requires authentication of client, as described in the Intra-ASEAN Secure Transactions Framework.

- i. Assess potential risks of the electronic.
- ii. Map identified risks to the application Level of Assurance.
- iii. Determine the requirements on identity proofing & verification.
- iv. Determine the requirements on authentication mechanism.

1. Description of Electronic Service:

ATIGA FORM D - The ASEAN Trade in Goods Agreement (ATIGA) FORM D is the certificate of origin issued by a national government to exporters so that it can be used by counterpart importers for a preferential rate.

There are many electronic services involving in the whole process. This case will focus only on the verification and acceptance of ATIGA FORM D exercised by the Customs Department of each ASEAN Member State. The user of such service is the appointed Customs officer who will be in charge of verifying and accepting the form before it can be utilized by the importer.

Functional Needs and Requirements for Authentication:

2. Risk Assessment of the Electronic Service

The electronic service shall be assessed on their level of potential damages or impacts, under six different categories in accordance with the Framework.

Instructions:

- Check (X) the appropriate level of impact (one check per each category).
- Provide justifications.

Impact Categories	Level of Impact				Justifications
	No	Lo	Mo	Hi	
<i>1. Inconvenience, distress, or damage to standing or reputation</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<i>2. Financial loss or agency liability</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<i>3. Harm to agency programs or public interests</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<i>4. Unauthorized release of sensitive information</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<i>5. Personal safety</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<i>6. Civil or criminal violations</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

No = No impact

Lo = Low impact

Mo = Moderate impact

Hi = High impact

* Please refer to **Table 3: Potential impact categories and values** on page 9 – 10 from **Intra-ASEAN Secure Transactions Framework Report** for details. The document is bundled with questionnaire package and can also be downloaded from <https://www.eta.or.th/publishing-detail/intra-asean-secure-transactions-framework-report.html>.

3. Map identified risks to the application Level of Assurance

Based on the assessed profile of impacts under six different categories, an overall assurance level will be determined by finding the lowest assurance level whose impact profile meets or exceeds the potential impact for every category determined in the previous step.

Instructions:

- Fill the level of impact (copied from part 2).
- Determine the suitable Level of Assurance on the last row.

Impact Categories	Level of Impact			
	LoA1	LoA2	LoA3	LoA4
1. Inconvenience, distress, or damage to standing or reputation	Low <input type="checkbox"/>	Moderate <input type="checkbox"/>	Moderate <input type="checkbox"/>	High <input type="checkbox"/>
2. Financial loss or agency liability	Low <input type="checkbox"/>	Moderate <input type="checkbox"/>	Moderate <input type="checkbox"/>	High <input type="checkbox"/>
3. Harm to agency programs or public interests	No <input type="checkbox"/>	Low <input type="checkbox"/>	Moderate <input type="checkbox"/>	High <input type="checkbox"/>
4. Unauthorized release of sensitive information	No <input type="checkbox"/>	Low <input type="checkbox"/>	Moderate <input type="checkbox"/>	High <input type="checkbox"/>
5. Personal safety	No <input type="checkbox"/>	No <input type="checkbox"/>	Low <input type="checkbox"/>	Moderate <input type="checkbox"/> High <input type="checkbox"/>
6. Civil or criminal violations	No <input type="checkbox"/>	Low <input type="checkbox"/>	Moderate <input type="checkbox"/>	High <input type="checkbox"/>
Lowest assurance level with impact profile that meets or exceeds the levels of all categories (highest level with one or more boxes checked)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Any adjustment to the Level of Assurance?

Yes / No

If yes, please provide details on the adjustment:

5. Level of Assurance assigned for the electronic service

Instructions:

- Fill in the blank the LoA level (Number 1 to 4).

LoA

6. Identity Proofing and Verification Requirements

Please explain registration requirements of your country for the electronic service and provide the list of documents used during the identity proofing and verification process.

If there is no particular service provided in your country, please provide registration requirements of a service with equivalent Level of Assurance.

7. Authentication Requirements

Please explain authentication requirements exercised in your country for the electronic service or any service with equivalent Level of Assurance.

- End of Worksheet -

Respondent Information

Name of Respondent:

Company / Organization:

Position / Job Title:

Job Description:

- | | |
|---|---------------------------------------|
| <input type="checkbox"/> IT Management | <input type="checkbox"/> Auditor |
| <input type="checkbox"/> IT Staff | <input type="checkbox"/> Lawyer |
| <input type="checkbox"/> Non-IT Management | <input type="checkbox"/> Researcher |
| <input type="checkbox"/> Software Developer | <input type="checkbox"/> Others _____ |

Address:

Telephone Number
(country area number):

E-mail Address:

Type of Organization:

- | | |
|--|---|
| <input type="checkbox"/> Govt. Ministry / Agency | <input type="checkbox"/> Locally-owned Enterprise |
| <input type="checkbox"/> Govt. / State Owned Enterprise | <input type="checkbox"/> Multinational |
| <input type="checkbox"/> University / Research Institution | <input type="checkbox"/> Others _____ |

Your cooperation will benefit to the ASEAN community. If you need any further information or have any inquiry, please feel free to contact Werachai Prayoonpruk via email werachai[at][etda.or.th](mailto:werachai@etda.or.th) or +662 123 1209 ext. 90920.