State And Local Cybersecurity Grant Program

ESA Application Walk Through

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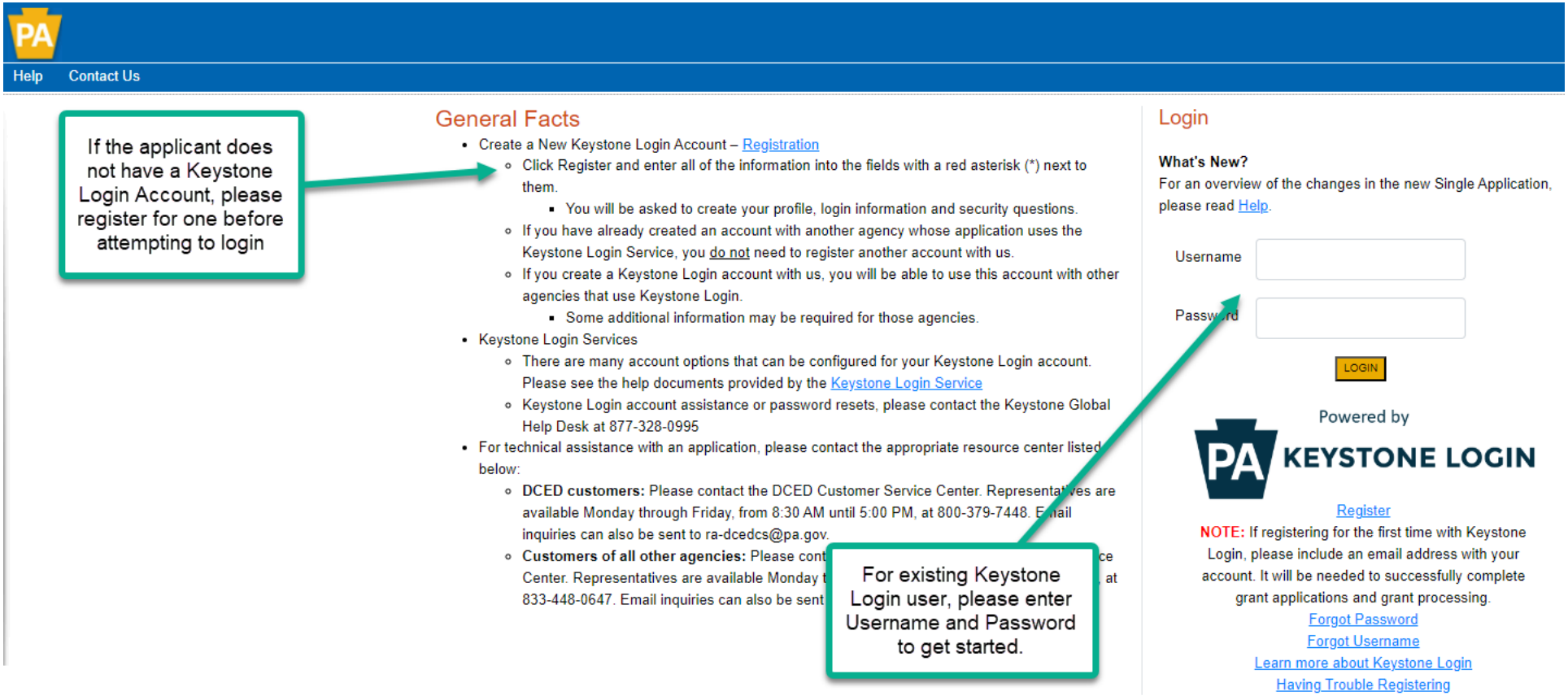
To start an application - [Single Application for Assistance (pa.gov)]



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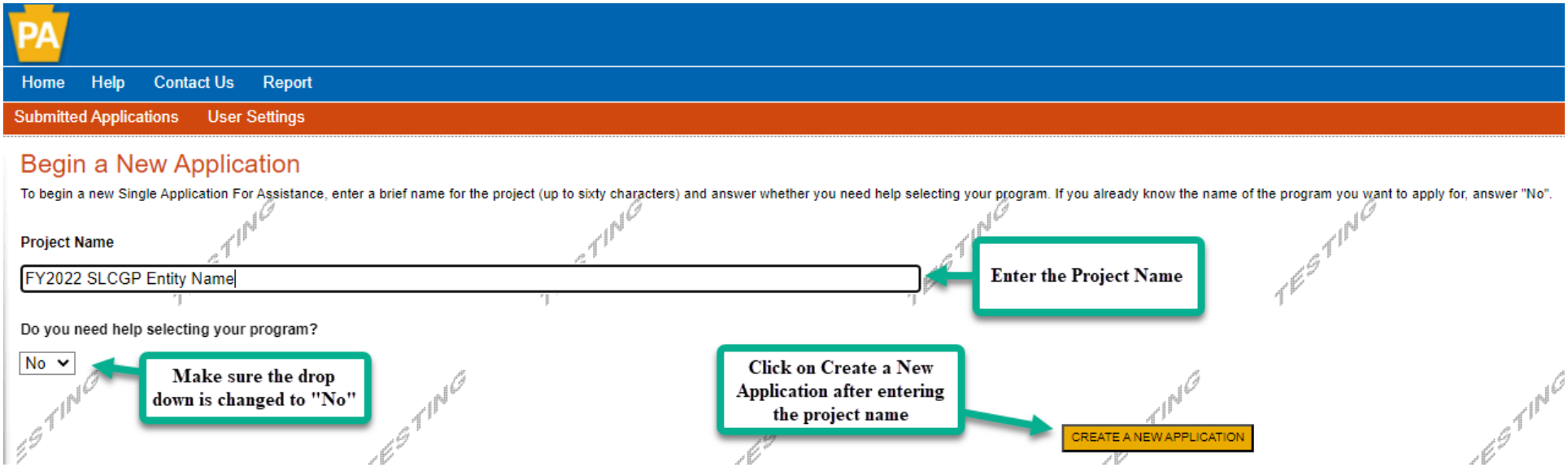

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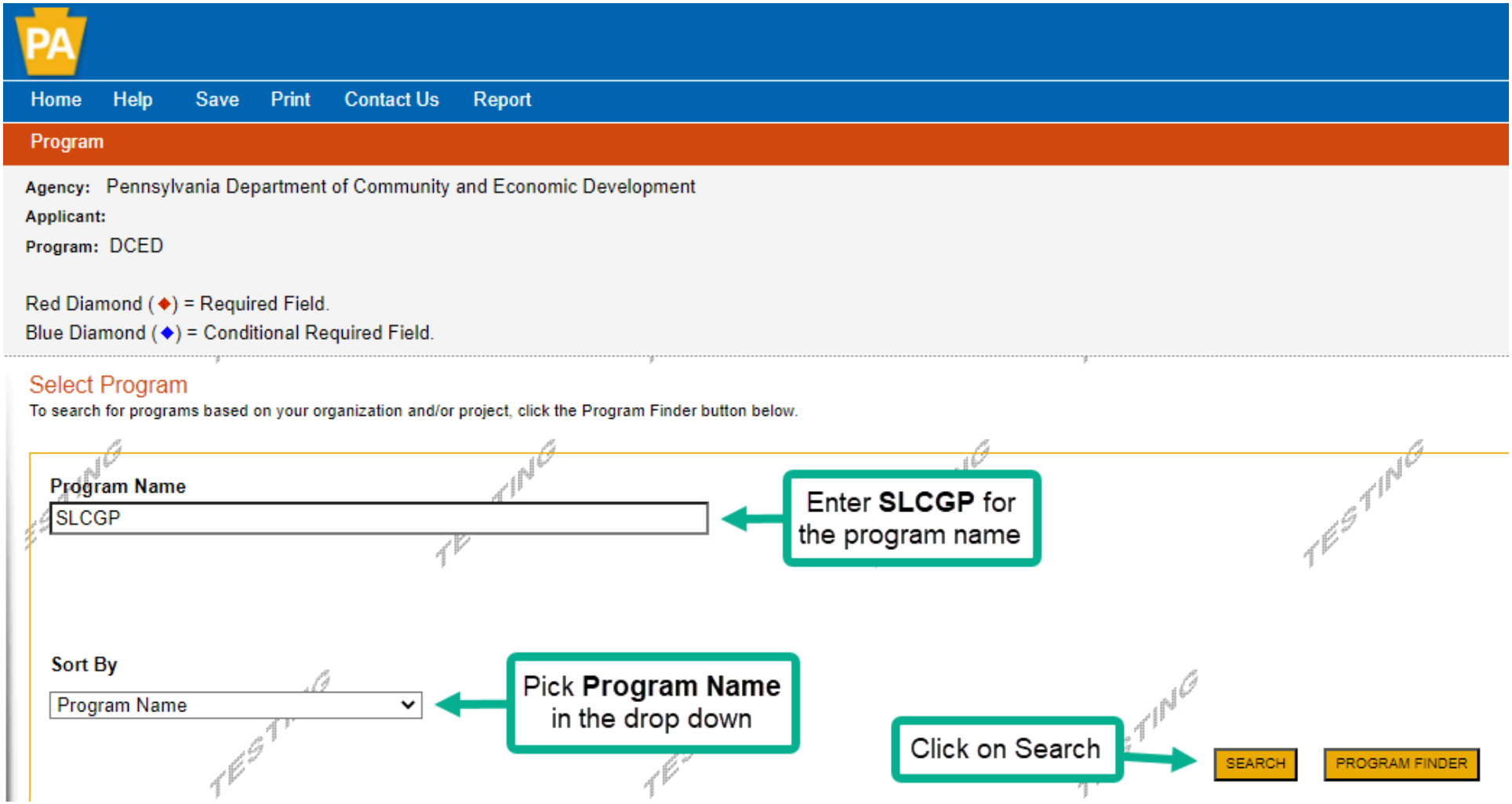

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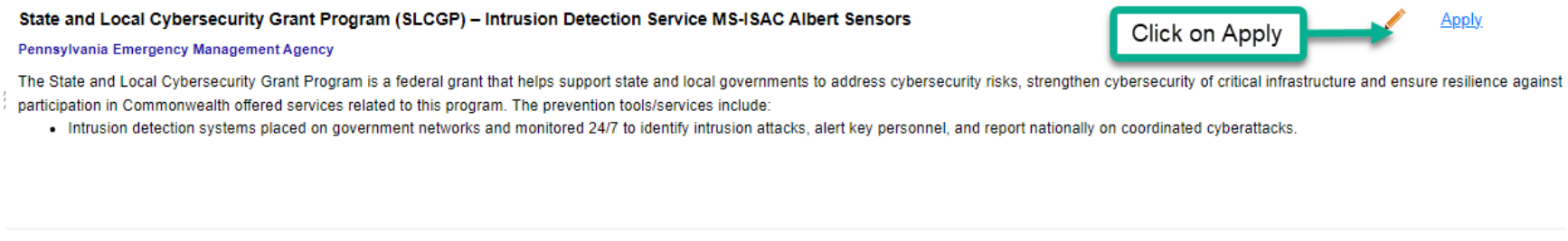
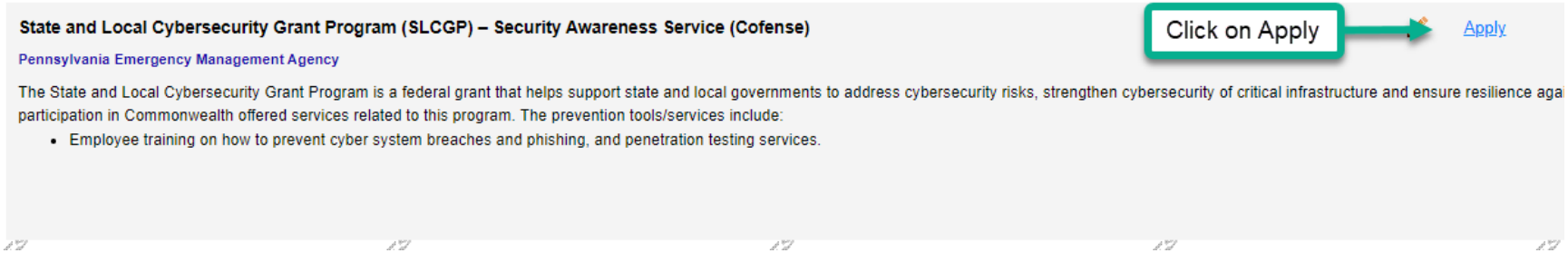
Please note there are four applications you will need to apply separately for each project that you would like to participate in

Only apply for the services that you would like to receive





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Applicant Information

To copy your Registration information into the application, click the "Use Account Information" button below.

Red Diamond (◆) = Required Field.
Blue Diamond (◆) = Conditional Required Field.

USE ACCOUNT INFORMATION

Applicant Entity Type:

- ○ Limited Liability Partnership
- ○ Partnership
- ○ Government
- ○ Non-Profit Corporation
- ○ Sole Proprietorship
- ○ Limited Liability Company
- ○ S Corporation
- ○ C Corporation

Pick the Applicant Entity Type that best describes the entity

Applicant Name: Test Entity

NAICS Code: 9211

Please enter **9211** as the NAICS Code

FEIN/SSN Number: 999999999

*Please enter FEIN as 9 digits, no dash

Please enter a valid 9 digit FEIN Number

UEI Number: AA00BB00CC00

Please enter a valid 12 digit UEI Number

Top Official/Signing Authority: Jack Test

Title: Chairman

SAP Vendor #: 000000

(xxxxxx or xxxxxx-xxx)

Contact Name: Mark Test

Contact Title: Chief Clerk

Phone: 717-000-0000 Ext.

(xxx-xxx-xxxx)

Fax:

E-mail: test@pa.gov

Mailing Address: 1310 Elmerton Avenue

City: Harrisburg

State: PA

Zip Code: 17110

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Enterprise Type

Indicate the types of enterprises that describe the organization listed above. You may select more than one type. ◆

☐ Advanced Technology	☐ Agri-Processor	☐ Agri-Producer	☐ Authority	☐ Biotechnology / Life Sciences
☐ Business Financial Services	☐ Call Center	☐ Child Care Center	☐ Commercial	☐ Community Dev. Provider
☐ Computer & Clerical Operators	☐ Defense Related	☐ Economic Dev. Provider	☐ Educational Facility	☐ Emergency Responder
☐ Environment and Conservation	☐ Exempt Facility	☐ Export Manufacturing	☐ Export Service	☐ Food Processing
☐ Government	☐ Healthcare	☐ Hospitality	☐ Industrial	☐ Manufacturing
☐ Mining	☐ Other	☐ Professional Services	☐ Recycling	☐ Regional & National Headquarters
☐ Research & Development	☐ Retail	☐ Social Services Provider	☐ Tourism Promotion	☐ Warehouse & Terminal

Pick the Enterprise Type that best describes your entity

Click Continue to move onto the next screen

Continue

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Project Site Location(s)

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Project Narrative

Adequate answers to the Project Narrative questions below are required. Uploaded attachments or mailed documents are no longer permitted in this section of the application. If a more detailed narrative is required for the Program selected, instructions will either be provided in the Addenda section or the Program Guidelines.

1. What do you want to accomplish with this project? ◆

Character Count: 85 characters.

Please click continue at the bottom right. Nothing additional is needed in this field

This area is prepopulated. There is no need to enter any information.

Click Continue to move onto the next screen

Continue

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This screen applies to the **Security Awareness Training - Cofense** application

Addenda

Below are additional application requirements specific to the program you selected. If you are having problems completing the Addenda because your organization or pr

Security Awareness training- Cofense

(Security awareness services ensure that all end users receive and complete security awareness training. This service provides for social engineering (phishing) the training and the overall risk level for this type of attack. Additional testing can be conducted as needed to further reinforce the concepts from this training. Rec

Are existing services (Cofense) in place? ◆

(This could be because of the grant or budgeted expenses)

Answer "Yes" or "No"

If Yes, what is the end date of the current contract?

If you answered "Yes" to the above question, you will need to input a date in the field. If answered "No", you can leave the field blank.

Eligible service dates: Must start before **11/30/2027.** Supplanting is **NOT** allowable. Refer to this documentation for more guidance on supplanting

Download SLCGP additional guidance -ESA.pdf

Requested service dates:

Start date: ◆

(Today's date if you do not currently have Cofense or the first day following the end of any current Tenable agreement/contract)

Remember to put your start date in the field.

End date: ◆

11/30/2027

Input the number of licenses you will need.

Total Number of licenses requested (each individual will need their own license, e.g. 200 employees you would need 200 licenses): ◆

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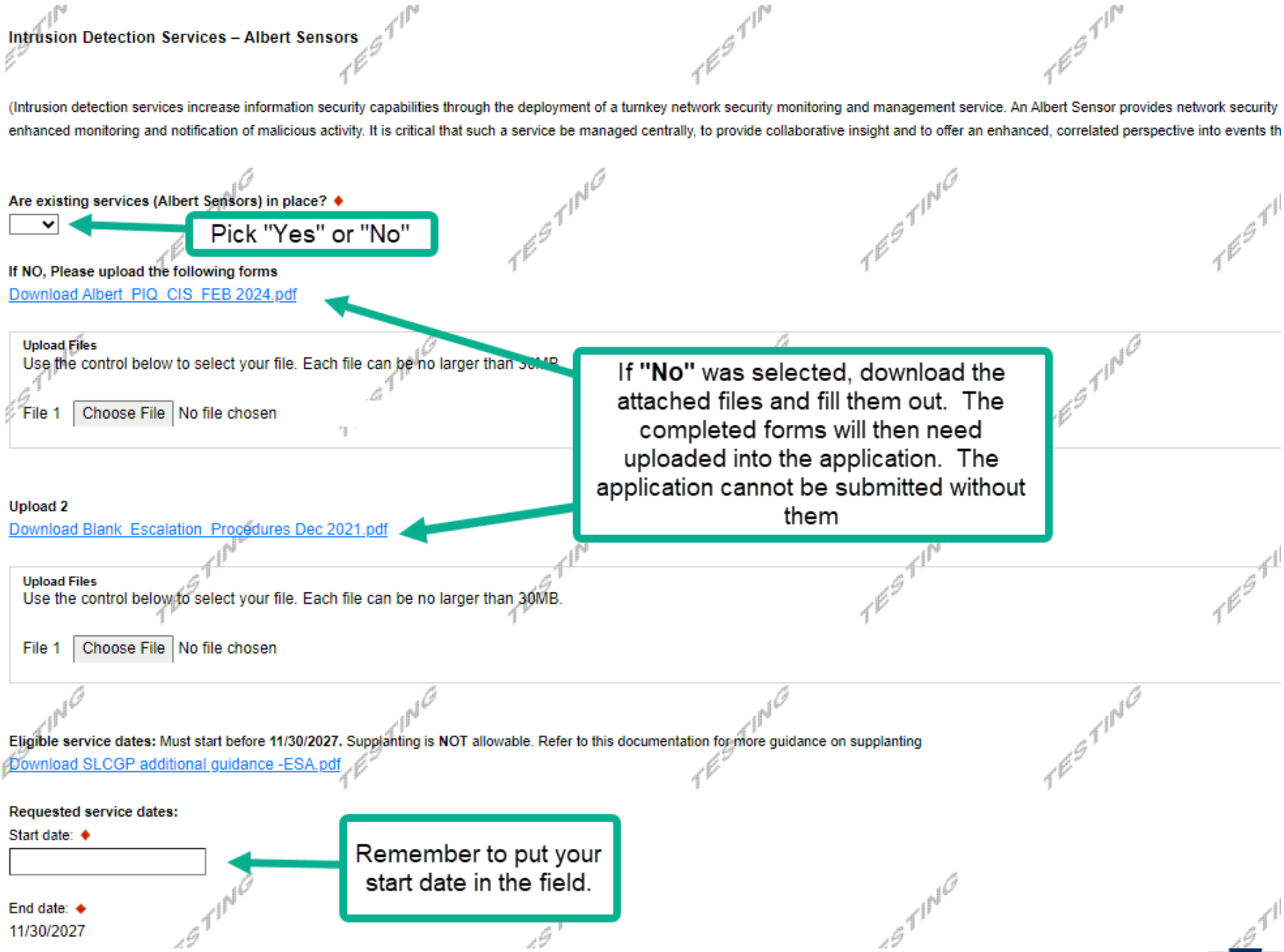
This screen applies to **Intrusion Detection Services – Albert Sensors** application



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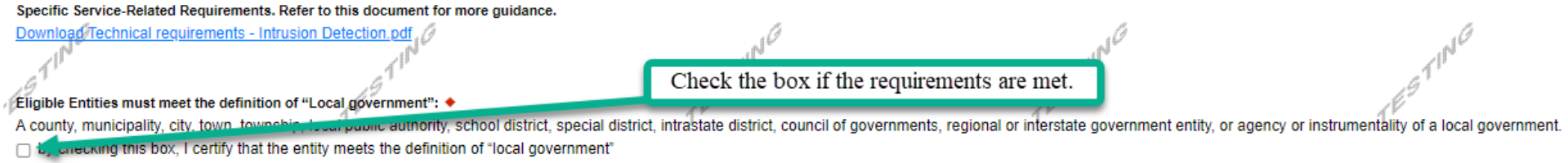
This screen applies to **Intrusion Detection Services – Albert Sensors** application continued



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This screen applies to **Vulnerability Management Solution - Tenable** application

Addenda

Below are additional application requirements specific to the program you selected. If you are having problems completing the Addenda because your organization or project do not meet the requirements listed below, please try changing your program.

Vulnerability Management Solution (Tenable)

Vulnerability Management Solution provides the ability of an organization to improve their cybersecurity posture by identifying, prioritizing and remediating vulnerabilities in their IT infrastructure. Tenable helps organizations identify, understand and manage the vulnerabilities and risks across their IT infrastructure.

Eligible service dates: Must start before **11/30/2027.** Supplanting is **NOT** allowable. Refer to this documentation for more guidance on supplanting
Download SLCGP additional guidance -ESA.pdf

Are existing services (Tenable) in place? (this could be because of the grant or budgeted expenses) ◆

Answer "Yes" or "No"

If Yes, what is the end date of the current contract?

If you answered "Yes" to the above question, you will need to input a date in the field. If answered "No", you can leave the field blank.

Requested service dates:

Start date: (today's date if you do not currently have Tenable or the first day following the end of any current Tenable agreement/contract) ◆

Remember to put your start date in the field.

End date: ◆
11/30/2027

Specific Service-Related Requirements. Refer to this document for more guidance.

Type of Services Requested: ◆

Select the type of service that you will need. There are 3 different options.

Asset types to consider: Desktops, Laptops, Workstations, Networking Gear, Servers, Traditional IT Endpoints

What is licensed: Each asset is 1 license. If a device is multi-homed, has multiple IPs, etc., this still only counts as 1 licensed asset.

Total Number of licenses requested based on information above: ◆

Input the number of licenses you will need.

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This screen applies to **Cyber Exposure Management and Asset Intelligence Platform - ARMIS** application

Addenda

Below are additional application requirements specific to the program you selected. If you are having problems completing the Addenda because your organization or project do not meet the requirements listed below, please try changing your program.

Cyber Exposure Management and Asset Intelligence Platform (ARMIS)

ARMIS is a cyber exposure management and asset intelligence platform that provides unified protection for all connected devices within an organization through holistic asset visibility and data-driven risk prioritization.

Are existing services (ARMIS) in place? (this could be because of the grant or budgeted expenses) ◆

Answer "Yes" or "No"

If Yes, what is the end date of the current contract?

If you answered "Yes" to the above question, you will need to input a date in the field. If answered "No", you can leave the field blank.

Eligible service dates: Must start before **11/30/2027.** Supplanting is **NOT** allowable. Refer to this documentation for more guidance on supplanting
Download SLCGP additional guidance -ESA.pdf

Requested service dates:

Start date: ◆

Remember to put your start date in the field.

End date: ◆
11/30/2027

Specific Service-Related Requirements. Refer to this document for more guidance.

Number of Employees (Full-time/Contractors): ◆

Input the number of employees.

Estimated Number of covered assets: (**Asset types to consider:** Desktops, laptops, servers, networking gear, traditional endpoints, IoT, OT, cloud assets. Any managed or unmanaged device or asset that connects to an organization's network or infrastructure.) ◆

Input the number of assets you have.

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The following screens apply to all applications

Other requirements that must be completed within a year (12 month period) after receiving the services:

Web Application Scanning is an "internet scanning-as-a-service." This service assesses the "health" of your publicly accessible web applications by checking for known vulnerabilities and weak configurations. Additionally, Cybersecurity and Infrastruc in accordance with industry and government best practices and standards.

- **Vulnerability Scanning** evaluates external network presence by executing continuous scans of public, static IPs for accessible services and vulnerabilities. This service provides weekly vulnerability reports and ad-hoc alerts.

To register for these services, email vulnerability_info@cisa.dhs.gov with the subject line "Requesting Cyber Hygiene Services – SLCGP" to get started. Indicate in the body of your email that you are requesting this service as part of the SLGCP. For more information, visit CISA's Cyber Hygiene Information Page.

Nationwide Cybersecurity Review

The NCSR is a free, anonymous, annual self-assessment designed to measure gaps and capabilities of a SLT's cybersecurity programs. It is based on the National Institute of Standards and Technology Cybersecurity Framework and is sponsored by DHS a administered by the MS-ISAC, within a year (12-month period) after receiving the services. Annual NCSR submission is generally open from October through February. For more information, visit Nationwide Cybersecurity Review (NCSR) (cisecurity.org)

☐ By checking this box, you confirm that you have read and understand the content of the following PDF document prior to submitting the application. ◆

Download SLCGP Grant Process FFY2023.pdf

Download the Instructions and then click on the check box.

IT contact information:

Name: ◆

Email: ◆

Phone Number: ◆

Enter the IT contact information for the entity.

Click Continue to move onto the next screen

Continue

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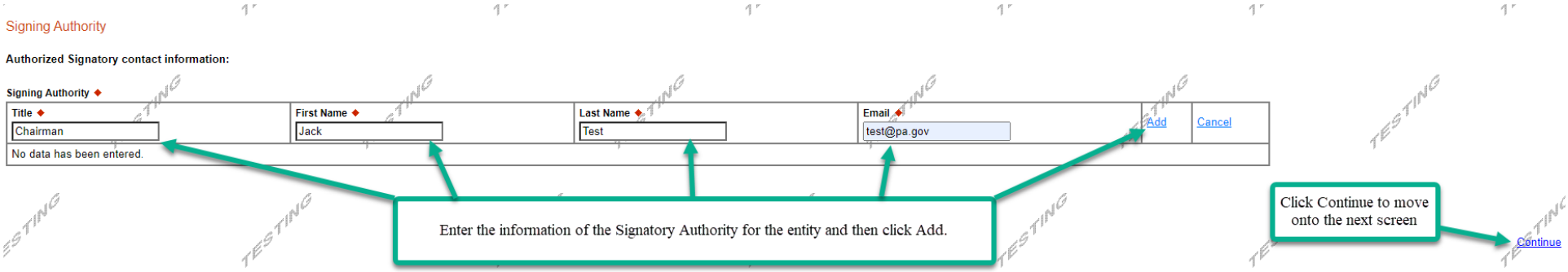
If an entity requires more than one signature to execute a contract, multiple Signatory Authorities can be added on this screen.



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Application Certification

All of the required sections of the web application have been completed. If you have reviewed the application, you may submit it for processing. **After submitting, you will no longer be able to mal**

Electronic Signature Agreement:

☐ By checking this box and typing your name in the below textbox, I hereby certify that all information contained in the single application and supporting materials submitted via the Internet and its att applicant, I have verified with an authorized representative of the Applicant that such information is true and correct and accurately represents the status and economic condition of the Applicant. I als be subject to criminal prosecution in accordance with 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) and 31 U.S.C. §§ 3729 and 3802 (relating to false claims and statements).

Please ensure that both Electronic Signature Agreement and the Electronic Attachment Agreement check boxes are checked.

○ I am the applicant.

○ I am an authorized representative of the company, organization or local government.

○ I am a "Certified" Partner representative.

Select the appropriate button for the signer designation.

Type Name Here:

Enter name of person filling out the application.

Electronic Attachment Agreement:

☐ Along with the web application, if you have been requested or need to send any documentation to PEMA please print and send a copy of your E-Signature and mail it to PEMA along with any pap

Click on button to submit application

SUBMIT APPLICATION

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Application Certification

Single Application ID #: 202308175087

The web application has been successfully submitted for processing.

I hereby certify that all information contained in the single application and supporting materials submitted via the Internet, Single Application # 202308175087 and its attachments are true an authorized representative of the Applicant that such information is true and correct and accurately represents the status and economic condition of the Applicant. I also understand tha prosecution in accordance with 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) and 31 U.S.C. §§ 3729 and 3802 (relating to false claims and statements).

The signature page may also be printed now. You may also print submitted applications from the Home page. Click the link labeled "Submitted Applications" in the top toolbar.

Print Signature Page only

Print Entire Application with Signature Page

There is an option to print the application signature page or the entire application for the entity's records.

The signature page along with any paper supporting documents can be mailed to the following address:

Pennsylvania Emergency Management Agency
At this time, Pennsylvania Emergency Management is not requesting any U. S. Postal mailings
,

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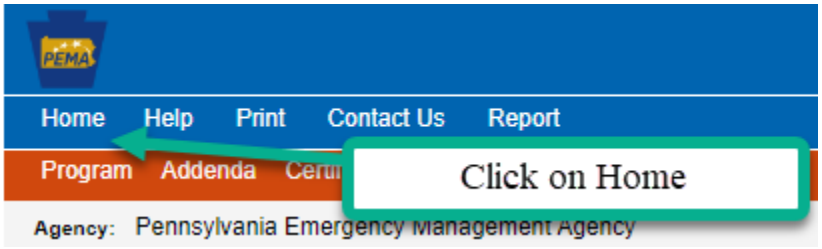
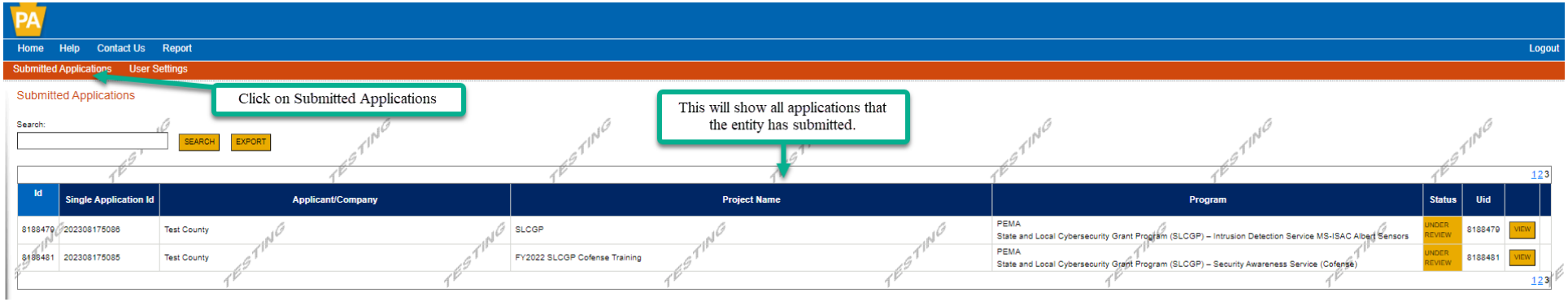
Here is where you can find your application after it has been submitted.





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