

# IP Gateway Landing Page

WARNING: Data contained on this system is Protected Critical Infrastructure Information. [Link to more info](#)



## IP Gateway



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### Latest News and Updates



#### 5/31/2019 - Dependency and Cascading Impacts Analysis Enhancements

The Dependency & Cascading Impacts Analysis tool in the IP Gateway is currently being enhanced. The Dependency & Cascading Impacts Analysis tool is a powerful analysis tool that utilizes dependency and resiliency data from completed surveys, assessments, and open source research to provide dependency and cascading impacts analysis capabilities. It enables stakeholders to make predictions regarding the impact of various events and incidents, and prioritize their planning, protection, response, and



#### 5/30/2019 - Special Events and Domestic Incident Tracker (SEDIT) Redesign

The Special Events and Domestic Incident Tracker (SEDIT) tool in the IP Gateway has been redesigned. The SEDIT application is a powerful analysis tool that uses the protection and resilience data from completed surveys and assessments to provide steady state, special event, and domestic incident support capabilities. It enables users to make predictions regarding the impact of various emergencies, and prioritize their planning, protection, response, and recovery efforts. The redesigned application



#### 3/20/2019 - PCII Myth Buster: Episode 1 - "PCII Can't Be Emailed?"

One of the many *myths* we hear in the PCII Program Office about PCII is that you cannot share PCII easily or rapidly. That is a myth and we are going to "Bust It!" There are many ways to share PCII while still protecting the information and the submitters identity, as required within the Critical Infrastructure Information Act of 2002 (CII Act) and it's executing federal regulation (6 CFR part 29).

PCII can be shared [ ]

# IP Gateway Landing Page

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## IP Gateway Tools and Capabilities

Surveys & Assessments

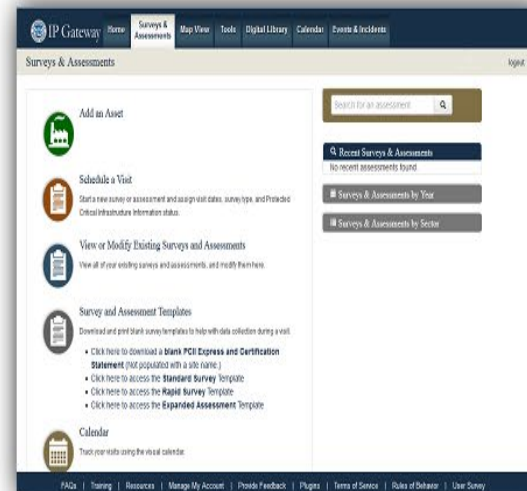
Map View

Digital Library

Events & Incidents

### Surveys & Assessments

The Surveys & Assessments application allows users to create, manage, view, and analyze non-regulatory surveys and assessments, ranging from high-level surveys to comprehensive in-depth assessments. Information found in these surveys and assessments provide users with critical infrastructure data, including security, vulnerability, threat, dependency, and consequence information, that provide a complete context to enhance the mission-specific needs of users.



OMB Control Number: 1670-0035, 1670-0009

OMB Expiration Date: 01/31/2020, 06/30/2020

# IP Gateway User Registration

## Privacy Act Statement



## IP Gateway

### Register for Access to IP Gateway

Step 1 of 3: General Information

United States Citizen: \*

Employee Type: \*

Role Requested: \*

- Assessor
- Analyst

**Warning**

use of this system may result in administrative disciplinary action and civil and criminal penalties. By continuing to use this system you indicate your awareness of and consent to these terms and conditions of use. LOG OFF IMMEDIATELY if you do not agree to the conditions stated in this warning.

Privacy Act Statement: Authority: 44 U.S.C. § 3101 and 44 U.S.C. § 3534 authorize the collection of this information. Purpose: DHS will use this information to create and manage your user account and grant access to the Infrastructure Protection (IP) Gateway. Routine Use: This information may be disclosed as generally permitted under 5 U.S.C. § 552a(b) of the Privacy Act of 1974. This includes using the information, as necessary and authorized by the routine uses published in DHS/ALL-004 - General Information Technology Access Account Records System (GITAARS) November 27, 2012, 77 Fed. Reg. 70,792. Disclosure: Furnishing this information is voluntary; however failure to provide the information requested may delay or prevent DHS from processing your access request.

Continue

→ Next

# IP Gateway User Registration

## PRA Burden Statement



## IP Gateway

### Register for Access to IP Gateway

#### Step 1 of 3: General Information

United States Citizen: \*

Employee Type: \*

Role Requested: \*  
 Assessor  
 Analyst

#### Warning

the information requested may delay or prevent DHS from processing your access request.

Paperwork Reduction Act: The public reporting burden to complete the instruments within this information collection are estimated at 7.5 hours for assessments, 10 minutes for surveys and user registration, 30 minutes for training. This includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and the completing and reviewing the collected information. The collection of information for the assessments, registration, and training is required to obtain a benefit. The collection of information for the surveys is voluntary. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number and expiration date. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to DHS/CISA, IPGatewayHelpDesk@hq.dhs.gov ATTN: PRA [OMB Control Number 1670-0009, 1670-0035]

Continue

# IP Gateway User Registration Step 1



IP Gateway

Register for Access to IP Gateway

## Step 1 of 3: General Information

United States Citizen: \*

Employee Type: \*

Role Requested: \*  
 Assessor  
 Analyst

→ Next

# IP Gateway User Registration Step 2 Federal Employee



IP Gateway

Register for Access to IP Gateway

## Step 2 of 3: Federal Government Employee

### Personnel Information

IDCA only:

First Name: \*

Last Name: \*

Middle Initial:

Department or Agency: \*

Component: \*

Role in organization: \*

Do you hold any regulatory or rule-making responsibilities: \*

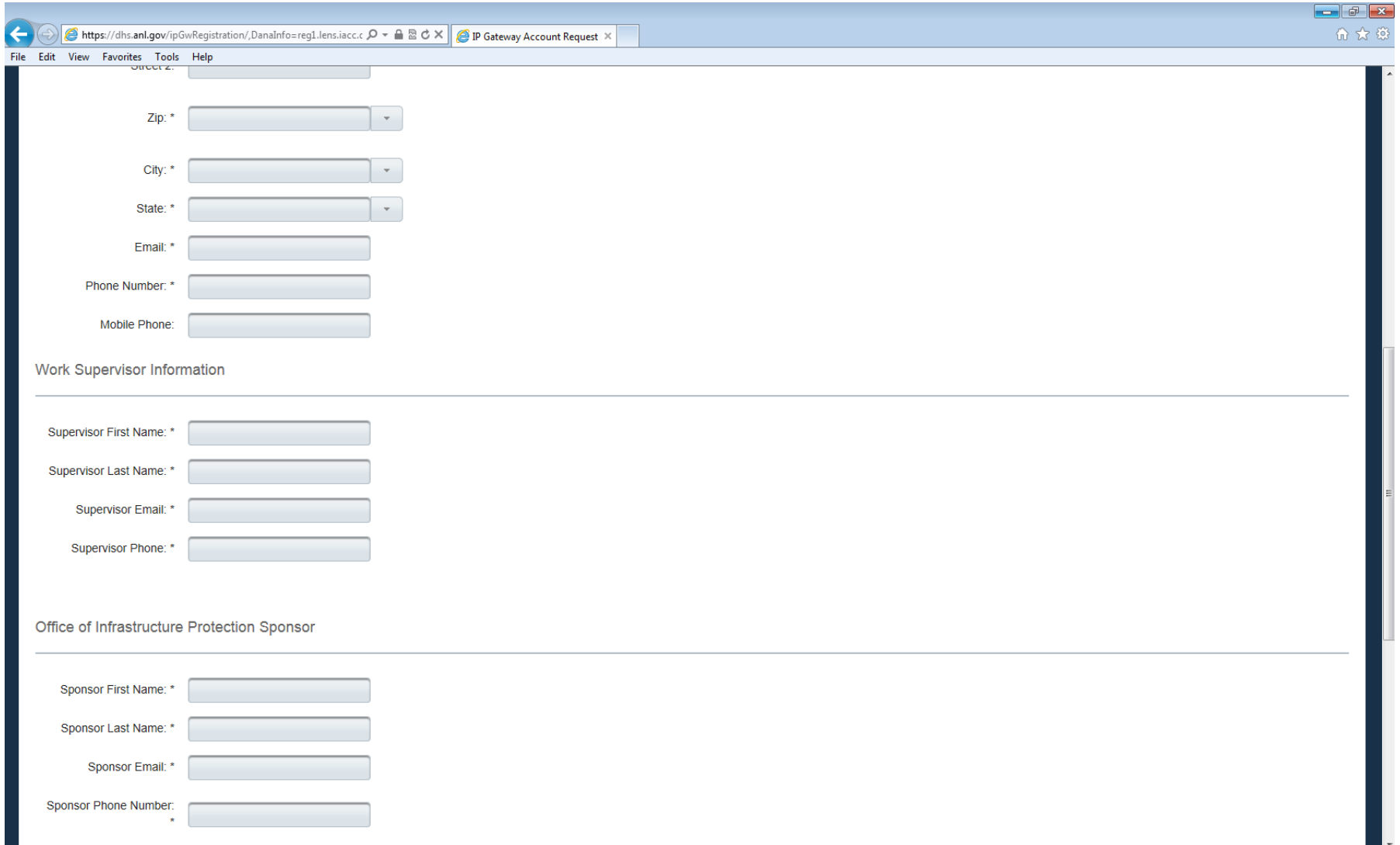
### Work Address

Street 1: \*

Street 2:

# IP Gateway User Registration Step 2

## Federal Employee Continued



https://dhs.anl.gov/ipGwRegistration/DanaInfo=reg1.lens.iacc.c IP Gateway Account Request

File Edit View Favorites Tools Help

Success:

Zip: \*

City: \*

State: \*

Email: \*

Phone Number: \*

Mobile Phone:

Work Supervisor Information

Supervisor First Name: \*

Supervisor Last Name: \*

Supervisor Email: \*

Supervisor Phone: \*

Office of Infrastructure Protection Sponsor

Sponsor First Name: \*

Sponsor Last Name: \*

Sponsor Email: \*

Sponsor Phone Number: \*

# IP Gateway User Registration Step 2

## Federal Employee Continued

Office of Infrastructure Protection Sponsor

Sponsor First Name: \*

Sponsor Last Name: \*

Sponsor Email: \*

Sponsor Phone Number: \*

Cyber Security Training

Does your organization provide annual Cyber Security and Awareness Training:

Organization Cyber Security Training Date:

Need to know

Need to know: \*

1000 characters remaining.



# IP Gateway User Registration Step 2

## Federal Government Contractor

Register for Access to IP Gateway

### Step 2 of 3: Federal Government Contractor

#### Personnel Information

---

IDCA only:

First Name: \*

Last Name: \*

Middle Initial:

Department or Agency Supported: \*

Component: \*

Role in organization: \*

Do you hold any regulatory or rule-making responsibilities: \*

#### Work Address

---

Street 1: \*

Street 2:

Zip: \*

City: \*

# IP Gateway User Registration Step 2

## Federal Government Contractor Continued

City: \*

State: \*

Email: \*

Phone Number: \*

Mobile Phone:

**Contract Administrator**

Please list the name of a government employee in your office who is knowledgeable about the official/ live status of the contract. (Sometimes called the 'Contract Administrator' or in Federal vernacular, the 'Contracting Official's Representative' (COR).

Contractor Rep. First Name: \*

Contractor Rep. Last Name: \*

Contractor Rep. Email: \*

Contractor Rep. Phone: \*

**Contracting Company Information**

Company Name: \*

Street 1: \*

Street 2:

Zip: \*

City: \*

State: \*

# IP Gateway User Registration Step 2 Federal Government Contractor Continued

Office of Infrastructure Protection Sponsor

Sponsor First Name: \*

Sponsor Last Name: \*

Sponsor Email: \*

Sponsor Phone Number: \*

Cyber Security Training

Does your organization provide annual Cyber Security and Awareness Training: Yes

Organization Cyber Security Training Date:

Need to know

Need to know: \*

1000 characters remaining.

← Back

→ Next

# IP Gateway User Registration Step 2 State Government Employee

Register for Access to IP Gateway

## Step 2 of 3: State Government Employee

### Personnel Information

IDCA only:

First Name: \*

Last Name: \*

Middle Initial:

State Government Name: \*

State Government Agency: \*

Role in organization: \*

Do you hold any regulatory or rule-making responsibilities: \*

### Work Address

Street 1: \*

Street 2:

Zip: \*

# IP Gateway User Registration Step 2 State Government Employee Continued

City:

State: \*

Email: \*

Phone Number: \*

Mobile Phone:

**Work Supervisor Information**

---

Supervisor First Name: \*

Supervisor Last Name: \*

Supervisor Email: \*

Supervisor Phone: \*

**Cyber Security Training**

---

Does your organization provide annual Cyber Security and Awareness Training:

Organization Cyber Security Training Date:

**Need to know**

---

Need to know: \*

# IP Gateway User Registration Step 2 State Contractor

Register for Access to IP Gateway

## Step 2 of 3: State Government Contractor

### Personnel Information

IDCA only:

First Name: \*

Last Name: \*

Middle Initial:

State Government Name: \*

State Government Agency Supported: \*

Role in organization: \*

Do you hold any regulatory or rule-making responsibilities: \*

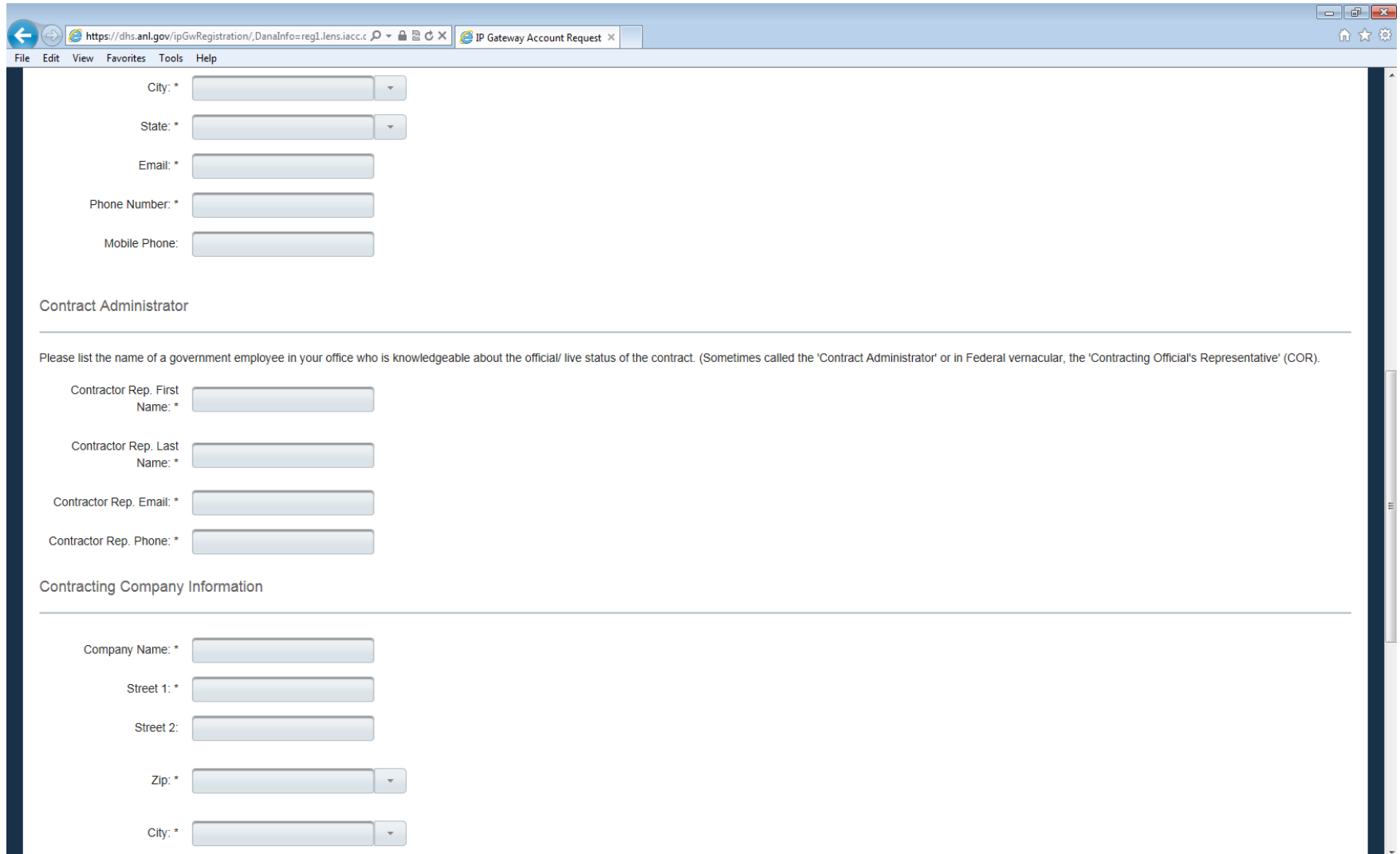
### Work Address

Street 1: \*

Street 2:

Zip: \*

# IP Gateway User Registration Step 2 State Contractor Continued



City: \*

State: \*

Email: \*

Phone Number: \*

Mobile Phone:

**Contract Administrator**

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Please list the name of a government employee in your office who is knowledgeable about the official/ live status of the contract. (Sometimes called the 'Contract Administrator' or in Federal vernacular, the 'Contracting Official's Representative' (COR).

Contractor Rep. First Name: \*

Contractor Rep. Last Name: \*

Contractor Rep. Email: \*

Contractor Rep. Phone: \*

**Contracting Company Information**

---

Company Name: \*

Street 1: \*

Street 2:

Zip: \*

City: \*

# IP Gateway User Registration Step 2 State Contractor Continued

The screenshot shows a web browser window with the URL <https://dhs.anl.gov/ipGwRegistration/,DanalInfo=reg1.lens.iacc.c> and a tab titled "IP Gateway Account Request". The browser's menu bar includes File, Edit, View, Favorites, Tools, and Help.

The registration form contains the following fields:

- Street 1: \*
- Street 2:
- Zip: \*
- City: \*
- State: \*

**Cyber Security Training**

Does your organization provide annual Cyber Security and Awareness Training: Yes

Organization Cyber Security Training Date:

**Need to know**

Need to know: \*

1000 characters remaining.

Navigation buttons: Back and Next.



# IP Gateway User Registration Step 2 Local Government Employee

Register for Access to IP Gateway

## Step 2 of 3: Local Government Employee

### Personnel Information

---

IDCA only:

First Name: \*

Last Name: \*

Middle Initial:

State Government Name: \*

Local Government Agency: \*

Role in organization: \*

Do you hold any regulatory or rule-making responsibilities: \*

### Work Address

---

Street 1: \*

Street 2:

Zip: \*

# IP Gateway User Registration Step 2 Local Government Employee

The screenshot shows a web browser window with the URL <https://dhs.anl.gov/ipGatewayRegistration/DanaInfo=reg1.tens.iacc.c> and a tab titled "IP Gateway Account Request". The browser's menu bar includes "File", "Edit", "View", "Favorites", "Tools", and "Help".

The registration form contains the following sections and fields:

- Personal Information:**
  - City: \* (dropdown menu)
  - State: \* (dropdown menu)
  - Email: \* (text input)
  - Phone Number: \* (text input)
  - Mobile Phone: (text input)
- Work Supervisor Information:**
  - Supervisor First Name: \* (text input)
  - Supervisor Last Name: \* (text input)
  - Supervisor Email: \* (text input)
  - Supervisor Phone: \* (text input)
- Cyber Security Training:**
  - Does your organization provide annual Cyber Security and Awareness Training: (dropdown menu with "Yes" selected)
  - Organization Cyber Security Training Date: (text input with a calendar icon)
- Need to know:**
  - (text input)

# IP Gateway User Registration Step 2 Local Government Contractor

Register for Access to IP Gateway

## Step 2 of 3: Local Government Contractor

### Personnel Information

---

IDCA only:

First Name: \*

Last Name: \*

Middle Initial:

State Government Name: \*

Local Government Agency Supported: \*

Role in organization: \*

Do you hold any regulatory or rule-making responsibilities: \*

### Work Address

---

Street 1: \*

Street 2:

Zip: \*

# IP Gateway User Registration Step 2 Local Government Contractor Continued

https://dhs.anl.gov/ipGwRegistration/DanaInfo=regL.lens.iacc.c IP Gateway Account Request

File Edit View Favorites Tools Help

City: \*

State: \*

Email: \*

Phone Number: \*

Mobile Phone:

**Contract Administrator**

---

Please list the name of a government employee in your office who is knowledgeable about the official/ live status of the contract. (Sometimes called the 'Contract Administrator' or in Federal vernacular, the 'Contracting Official's Representative' (COR).

Contractor Rep. First Name: \*

Contractor Rep. Last Name: \*

Contractor Rep. Email: \*

Contractor Rep. Phone: \*

**Contracting Company Information**

---

Company Name: \*

Street 1: \*

Street 2:

Zip: \*

City: \*

# IP Gateway User Registration Step 2 Local Government Contractor Continued

Company Name:

Street 1: \*

Street 2:

Zip: \*

City: \*

State: \*

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### Cyber Security Training

Does your organization provide annual Cyber Security and Awareness Training:

Organization Cyber Security Training Date:

---

### Need to know

Need to know: \*

1000 characters remaining.

# IP Gateway User Registration Step 2 Tribal Government Employee

Register for Access to IP Gateway

## Step 2 of 3: Tribal Government Employee

### Personnel Information

---

IDCA only:

First Name: \*

Last Name: \*

Middle Initial:

Tribal Government Name: \*

Tribal Government Supported: \*

Role in organization: \*

Do you hold any regulatory or rule-making responsibilities: \*

### Work Address

---

Street 1: \*

Street 2:

Zip: \*

# IP Gateway User Registration Step 2 Tribal Government Employee Continued

The screenshot shows a web browser window with the following details:

- Address bar: [https://dhs.anl.gov/ipGwRegistration/\\_DanaInfo=reg1.lens.iacc.c](https://dhs.anl.gov/ipGwRegistration/_DanaInfo=reg1.lens.iacc.c)
- Page Title: IP Gateway Account Request
- Menu: File, Edit, View, Favorites, Tools, Help

The form contains the following sections and fields:

- City:** \* [Dropdown menu]
- State:** \* [Dropdown menu]
- Email:** \* [Text input]
- Phone Number:** \* [Text input]
- Mobile Phone:** [Text input]
- Work Supervisor Information**

---

  - Supervisor First Name:** \* [Text input]
  - Supervisor Last Name:** \* [Text input]
  - Supervisor Email:** \* [Text input]
  - Supervisor Phone:** \* [Text input]
- Cyber Security Training**

---

  - Does your organization provide annual Cyber Security and Awareness Training: [Dropdown menu with "Yes" selected]
  - Organization Cyber Security Training Date: [Text input]
- Need to know**

---

  - [Text input]

# IP Gateway User Registration Step 2 Tribal Government Contractor

Register for Access to IP Gateway

## Step 2 of 3: Tribal Government Contractor

### Personnel Information

IDCA only:

First Name: \*

Last Name: \*

Middle Initial:

Tribal Government Name: \*

Tribal Government Agency Supported: \*

Role in organization: \*

Do you hold any regulatory or rule-making responsibilities: \*

### Work Address

Street 1: \*

Street 2:

Zip: \*



# IP Gateway User Registration Step 2 Tribal Government Contractor Continued

City: \*

State: \*

Email: \*

Phone Number: \*

Mobile Phone:

---

**Contract Administrator**

Please list the name of a government employee in your office who is knowledgeable about the official/ live status of the contract. (Sometimes called the 'Contract Administrator' or in Federal vernacular, the 'Contracting Official's Representative' (COR).

Contractor Rep. First Name: \*

Contractor Rep. Last Name: \*

Contractor Rep. Email: \*

Contractor Rep. Phone: \*

---

**Contracting Company Information**

Company Name: \*

Street 1: \*

Street 2:

Zip: \*

City: \*

# IP Gateway User Registration Step 2 Tribal Government Contractor Continued

https://dhs.anl.gov/ipGwRegistration/DanInfo=regL.lens.iacc.c IP Gateway Account Request

File Edit View Favorites Tools Help

Street 1: \*

Street 2:

Zip: \*

City: \*

State: \*

Cyber Security Training

Does your organization provide annual Cyber Security and Awareness Training: Yes

Organization Cyber Security Training Date:

Need to know

Need to know: \*


1000 characters remaining.

Back Next

# IP Gateway User Registration Step 3

Browser address bar: <https://dhs.anl.gov/ipGwRegistration/DanaInfo=reg1.Jens.iacc.x> IP Gateway Account Request

File Edit View Favorites Tools Help



## IP Gateway

### Register for Access to IP Gateway

Step 3 of 3: PCI

Access Requested For: \*

PCI trained: \* Yes

PCI Certification number:

---

How do you plan to use this information:

- Analysis or CIP program coordination
- Incident Planning
- Emergency Response
- Performing Assessments
- Other

Other use of this information:

Register account request: