

# ELECTRONIC DATA PROCESSING

## Supplemental Questionnaire

- A. Electrical System was installed or updated within the past 20 years . . . . Yes  No
- B. Fire detection and suppression system include
- |  |                              |                             |
|--|------------------------------|-----------------------------|
| Approved automatic fire extinguishing system . . . . . | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| In EDP room . . . . .                                  | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| In data/media storage room . . . . .                   | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Smoke detectors are: . . . . .                         | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| In EDP room . . . . .                                  | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| In ventilation duct work . . . . .                     | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| In data/media storage room . . . . .                   | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
- C. Security includes:
- |   |                              |                             |
|---|------------------------------|-----------------------------|
| 24 hour/7 day week operation . . . . .                | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| U.L. approved central station burglar alarm . . . . . | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Watchman making recorded rounds including . . . . .   | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| EDP equipment area . . . . .                          | Yes <input type="checkbox"/> | No <input type="checkbox"/> |