



**BANKING SECTOR EDUCATION AND TRAINING AUTHORITY
(BANKSETA)**

**RFB - APPOINTMENT OF A SUITABLY QUALIFIED PROVIDER
TO SUPPLY, DELIVERY, INSTALLATION OF SECURITY
INFORMATION AND EVENT MANAGEMENT SOLUTION
(SIEM).**

Bid No: BS/2022/RFB469

ANNEXURE B – CHECKLIST

SPECIFICATION CHECKLIST AGAINST SUBMITTED PROPOSAL– TO BE COMPLETED BY ALL BIDDERS				
Clause per TOR	Specification/Terms of Reference Requirement	Complies to specification (Yes/No)	Comments/Further Information	Reference section on the proposal
3.				
3.1	Collect security data from network devices, servers, domain controllers, firewall, applications, and managed switch.			
3.2	Provide reports and forensics information about security incidents,			
3.3	Provide, manage, monitoring, deploy, integrate, instal and support, and all services necessary to fulfil and operationalize the equipment.			
3.4	Provide 24x7 Availability, Monitoring, Analysis by experts, and Technical Support, and incident response.			
3.5	Provide access to management, monitoring, and reporting Dashboards.			

3.6	Provide (24x7) Incident Handling and Response.			
3.7	Must be able to take in event logs from different types of devices, systems, applications, end points and able to correlate them to identify any security incident.			
3.8	Provides security intelligence analytics.			
3.9	Built-in disaster recovery and business continuity planning.			
3.10	Provide training for three BANKSETA personnel for operation and management of SIEM solution.			
3.11	Centralize and aggregate all security-relevant events as they're generated from their source.			
3.12	Support a variety of reception, collection mechanisms including syslog, file transmissions, file collections, file modification.			
3.13	Correlate incidents across a range of data and provide alerts.			
3.14	Detect advanced and unknown threats.			
3.15	Profile behaviour across the organization.			
3.16	Assess and report on compliance posture.			
3.17	Use analytics and report on security posture.			
3.18	Provide ICT SIEM operational procedure manual.			

Service Provider Name _____

Name of person Signing _____

Signature _____

Date _____