Exhibit 9
Network Access Agreement

This agreement is between King County Department of Information Technology (KICIT) and _____ (Contractor) and is effective from the County's Contract signature date for a period of 18 months, unless otherwise specified below. After which this agreement will be reviewed and renewed, if appropriate.

As a contractor and/or vendor requiring access to the King County Network and/or resources, I/we acknowledge that I/we are in a position of trust, and I/we understand that I/we may have access to proprietary, sensitive or confidential information, computers, networks, and/or system for the following business purpose:

Describe the specific purpose below (in detail):

Records, files, databases, and systems to which I/we may be given access may contain proprietary, sensitive or confidential as well as public information therefore I/we understand and agree to the following:

1. I/we are responsible for the security and privacy of information and systems to which I/we have access or to which I/we may otherwise obtain access even if such access is inadvertent or unintended.

2. I/we are responsible for the security of the systems I/we use to connect to King County, and I/we agree:

   a. To ensure my/our computer resources are free of all known malicious software and are running current Anti-Virus/Anti-Malware and host firewall software.

   b. To not make computer networks or systems available to others unless I/we have received specific authorization from the Information Owner of the system or network and King County's Information Assurance Office.

3. I/we may access, read or handle sensitive, and/or confidential information to the extent required to perform my/our assigned duties to King County.

4. Although I/we may have access to certain sensitive, and/or confidential information, I/we agree to not access such information unless it is necessary for the performance of my/our assigned duties.

5. Not to divulge, publish, share, or otherwise make known to unauthorized persons or to the public any sensitive or confidential information obtained while working for King County. I/we understand that:

   a. I/we may divulge sensitive or confidential information to authorized King County staff and managers as necessary to perform my/our duties;

   b. I/we may divulge sensitive or confidential information to others only if specifically authorized to do so by federal, state, or local statute, regulation or court order, and with the knowledge of my/our contract manager;

   c. I/we may not discuss sensitive or confidential information outside of the workplace or outside of my/our usual work area.

6. To consult my contract manager on any questions I/we may have concerning whether specific information may be disclosed.

7. A breach of confidentiality or information security may be grounds for disciplinary or legal action and in some circumstances, criminal prosecution.

8. Notify the King County Contract Specialist or the Information Security, Risk, and Compliance (ISRC) Office immediately should I/we become aware of an actual breach of confidentiality or information security or a situation that could potentially result in a breach, whether this is on my/our part or on the part of another person.

Connection Type	Connection address or network range	Connection term:	Contact information for Maintenance	Non-Disclosure agreement required?
Example: IPSEC VPN Tunnel	10.x.x.x/26		BlackCat@King County.gov	Yes

Exhibit 9
Network Access Agreement

or Remote Access: Cisco AnyConnect	or 10.x.x.x	6 Months (6/1/2014 – 12/31/2014)		

By signing this statement, I/we affirm my/our organization's understanding of my/our responsibilities to maintain information security and confidentiality in relation to the access being granted to King County information assets and systems.

Signatures:

_____   _____   _____
Representative of Outside Organization   Date   Printed Name of Representative for Outside
                                                                                 Organization

_____   _____   _____
Organization Address   Representative's Telephone   Representative's email address

_____   _____   _____
King County Service Owner/Representative   Date   King County Service Owner/Representative
signature   Printed Name