

U.S. Bank External Data Transmission Questionnaire (DTQ)

The purpose of the U.S. Bank Data Transmission Questionnaire is to gather the information necessary to implement your U.S. Bank File Transmission Service. **NOTE:** All required fields are noted with a red asterisk (*). Please complete the DTQ in its entirety. Incomplete DTQs may cause delays in your transmission implementation. Refer to the instructions section for field definitions and additional help if required.

U.S. Bank Representative

*Contact Name: _____
*Phone Number: _____
*Email Address: _____@usbank.com

Customer Contact Information

The individual listed here will be the lead contact from your company throughout the implementation.

*Company Name: _____
*Mailing Address: _____
*City: _____ *State: _____ *Zip Code: _____
*Contact Name: _____ *Phone Number: _____
*Email Address: _____

Other name(s) by which your company may be known: _____

*If using a third party transmitter per the section below, is U.S. Bank authorized to share logon credentials with the third party transmitter? Yes ☐ No ☐

Name of individual authorizing credentials to be shared. _____

Transmitter Information

The company listed will be responsible for sending or receiving files to or from U.S. Bank. May be your company or a third party provider.

☐ Same As Customer Contact Information Above. Fields below are not required if box is checked.

*Transmitter Company Name: _____
*Mailing Address: _____
*City: _____ *State: _____ *Zip Code: _____
*Contact Name: _____ *Phone Number: _____
*Email Address: _____

Transmission Method

Provide information about the type of transmission being established and about existing transmissions.

*Do you require assistance to determine a Transmission Method? ☐ Yes ☐ No
If Yes, provide Contact Name, Email, and Phone Number:
Contact Name: _____
Email Address: _____
Phone Number: _____

*Transmission Protocol Options (Select One): ☐ HTTPS (Web Browser)
☐ FTPS (SSL) – Complete Appendix B
☐ SFTP (SSH) – Complete Appendix C
☐ AS2 (Not available for U.S. Bank Image Cash Letter service)
☐ Connect:Direct (VPN required) Node Name: Test Node:
(Not available for SPT Info Reporting File Delivery or VantagePoint)

*Do you require PGP Data Encryption?
(PGP Encryption not available for SinglePoint Transmissions)

☐ No ☐ Yes

What is your Operating System (Required if PGP required)

☐ Windows ☐ Unix
☐ Other (Provide Name)

*Do you require a Date/Time stamp for files received from U.S. Bank?

☐ No ☐ Yes

☐ Yes – Standard Format: YYYYMMDD.HHMMSS

☐ Yes - Custom Format: _____

*Provide existing Mailbox or User ID with U.S. Bank, if known. If you have an existing Mailbox ID, would you like to use that same ID for these new transmission(s), or do you require a new ID be created?

Existing Mailbox ID

☐ Use Existing ☐ Create New

File Transmission Contacts

The purpose of this section is to obtain information about the individuals who will be responsible for testing connectivity, testing file format and production support for transmissions to and from U.S. Bank.

Transmission Connectivity Testing Contacts

Note: Contacts responsible for testing file connectivity with U.S. Bank.

*Primary Contact Name: _____

*Secondary Contact Name: _____

*Phone Number: _____

*Phone Number: _____

*Email Address: _____

*Email Address: _____

File Format Testing Contacts

Note: Contacts responsible for validating file format and content with U.S. Bank.

☐ Same As Above

☐ Same As Above

*Primary Contact Name: _____

*Secondary Contact Name: _____

*Phone Number: _____

*Phone Number: _____

*Email Address: _____

*Email Address: _____

Transmission Production Support Contacts

Note: Contacts responsible for support of live transmission files in production.

☐ Same As Above

☐ Same As Above

*Primary Contact Name: _____

*Secondary Contact Name: _____

*Phone Number: _____

*Phone Number: _____

*Email Address: _____

*Email Address: _____

Comments

The purpose of this area is to communicate any information U.S. Bank should be aware of regarding the transmission request. This should include any special requirements. (Limit to 850 characters)

Comments:

HTTPS

A secure means of transferring data using Hypertext Transfer Protocol Secure (HTTPS) within a connection encrypted by Transport Layer or its predecessor, Secure Sockets Layer.

For this easy-to-use solution, you will be given a User ID and password to logon to our U.S. Bank Secure File Transfer website to send and receive files over the Internet. This is a manual method.

Security and Benefits:

- Transmissions are encrypted. This site supports TLS 1.2. U.S. Bank continues to take the strongest measures necessary to ensure the security of the data transfer.
- User ID and password are encrypted and authenticated to allow confidential access to your data.
- No network or firewall changes required for this option.

Requirements

- Web browsers (i.e. Microsoft Internet Explorer 6.x and later; Apple Safari 3.2.x and later; Mozilla Firefox 3.5 and later)

Optional

- Pretty Good Privacy (PGP) encryption (additional fees may apply)

Other

- Manual method of exchanging files via website

FTPS (SSL)

File Transfer Protocol Secure (FTPS). If you select this option, **Appendix B is required** to be completed.

Security and Benefits:

- Transmissions are encrypted using TLS encryption. We support TLS 1.2. U.S. Bank continues to take the strongest measures necessary to ensure the security of the data transfer.
- User ID and password are encrypted and authenticated to allow confidential access to your data.

Requirements

- FTPS software clients with TLS encryption. ("Passive Mode" is required)
- Explicit Mode (AUTH TLS)
- Communication Control Port 20021 and Passive Data Port Range 21000 – 21400

Optional:

- PGP encryption (additional fees may apply).
- U.S. Bank can initiate the session to send (push) files
- Customer's staff or their software/service vendor can automate transmissions

SFTP (SSH) (Preferred Method)

Secure File Transfer Protocol (SFTP) with Secure Shell. If you select this option, **Appendix C is required** to be completed.

Security and Benefits:

- SSH encrypts credentials and data before sending it over the open network
- This site supports CTR ciphers and up to group 14 key exchanges.

Requirements:

- SFTP software clients with SSH public key(preferred) or password authentication
- Connection Port 20022
- SFTP command (e.g. sftp -o Port=20022 yourusbankid@filegateway.usbank.com)

Optional:

- PGP encryption (additional fees may apply)
- U.S. Bank can initiate the session to send (push) files
- Customer's staff or their software/service vendor may automate transmissions

Applicability Statement 2 (AS2)

A specification for securely exchanging files over the Internet using Multipurpose Internet Mail Extensions (MIME) and HTTP.

Security and Benefits:

- Transmissions are encrypted to ensure only the sender and receiver can view the data
- Designed to push files securely and reliably over the Internet
- Digital signatures ensure authentication
- Non-repudiation of receipt confirms that intended party received the file

Requirements

- Certified AS2 software packages – see <http://www.drummondgroup.com>

Optional:

- PGP encryption (additional fees may apply)
- File compression

Other:

- This protocol is not available with U.S. Bank's Image Cash Letter product.
- Additional forms will be provided later to exchange AS2 information.

Connect: Direct

IBM proprietary software used for assured delivery of files over the Internet.

Security and Benefits:

- Site-to-Site IPsec encrypted tunnel is required
- Advanced security options for perimeter authentication, data privacy and integrity

Requirements:

- IBM Connect:Direct software
- U.S. Bank requires a primary and a redundant VPN tunnel for disaster recovery purposes
- All outbound files are "pushed" to receiver's Connect:Direct node

Optional:

- Connect:Direct Secure+ is required for files containing PCI data
- PGP encryption (additional fees may apply)

Other:

- This protocol is not available with SPT Info Reporting File Delivery and VantagePoint products.
- Additional forms will be provided later to exchange Connect:Direct information.

Appendix B: U.S. Bank FTPS (SSL) Transmission Questionnaire

The purpose of Appendix B: U.S. Bank FTPS (SSL) Transmission Questionnaire is to gather the information necessary to implement your FTPS (SSL) protocol method with U.S. Bank.

NOTE: All required fields are noted with a red asterisk (*). Please complete the Appendix B in its entirety. Incomplete Appendix B's may cause delays in your FTPS-SSL transmission implementation.

Transmitter Information

*Transmitter Company Name: _____

(Must match Transmitter Company Name Provided on Page 1)

*Do you require U.S. Bank to push files out to your server?

☐ Yes – Review Section 1 and Complete Section 2

☐ No – Review Section 1 Only

Section 1: U.S. Bank Server Information

	Server DNS Names	IP Addresses
Test:	filegateway-test.usbank.com	170.135.187.73
Production:	filegateway.usbank.com	170.135.187.8
Disaster Recovery	filegateway.usbank.com	170.135.228.9
Control Port Number: 20021	Data Port Range: 21000 – 21400	
NOTE: FTP Data Transfer Mode must be Passive for you to connect to U.S. Bank. Explicit Mode is required. U.S. Bank requires TLS 1.2.		

Section 2: Transmitter Server Information

*Provide either your Connection Public IP Address or your Connection DNS (if your site uses DNS Naming):

	Test	Disaster Recovery (Optional)	Production
Connection DNS:			
Connection Public IP Address:			
The following IP Addresses are not allowed: 10.0.0.0 - 10.255.255.255 172.16.0.0 - 172.31.255.255 192.168.0.0 - 192.168.255.255			
*Server SSL Certificate Self Signed: ☐ Yes ☐ No			

*Provide Your Transmitter Server Requirements:

	Test	Disaster Recovery (Optional)	Production
*File Directory / Navigational Path: (Indicate the navigational path after logged into your server to place files on your server)			
*File Name(s): (USBank's standard filename convention will be used unless you specify otherwise here. The unique filename will be provided to you during testing.) (Multiple File Names can be listed)			
* U.S. Bank User ID on your Server:			
*Control Port Number (ex Port 21) :			
*Your Operating System Platform: ☐ Windows ☐ Unix ☐ Other: (Provide Name)			
Authentication Password: ☐ Non Expiring (Preferred) ☐ Expiring			
*FTPS Data Transfer Mode will be Passive ☐ or Active ☐ when U.S. Bank connects to you.			
Your Data Port Range: _____			

Appendix C: U.S. Bank SFTP (SSH) Transmission Questionnaire

The purpose of Appendix C: U.S. Bank SFTP (SSH) Transmission Questionnaire is to gather the information necessary to implement your SFTP (SSH) protocol method with U.S. Bank.

NOTE: All required fields are noted with a red asterisk (*). Please complete the Appendix C in its entirety. Incomplete Appendix C's may cause delays in your SFTP-SSH transmission implementation.

Transmitter Information

*Transmitter Company Name: _____

(Must match Transmitter Company Name Provided on Page 1)

*Do you require U.S. Bank to push files out to your server? ☐ Yes – Review Section 1 and Complete Section 2
☐ No – Review Section 1 Only

U.S. Bank Server Information is provided below.

Please provide your planned firewall update date (if applicable):

Section 1: U.S. Bank Server Information

	Server DNS Names	IP Addresses
Test:	filegateway-test.usbank.com	170.135.187.73
Production:	filegateway.usbank.com	170.135.187.8
Disaster Recovery	filegateway.usbank.com	170.135.228.9
Port Number: 20022		

Section 2: Transmitter Server Information

*Your required type of Security Authentication?

☐ SSH Public Key (Preferred) ☐ Non-expiring Password ☐ Expiring Password

*Provide your Connection Public IP Address or your Connection DNS (if your site uses DNS Naming):

	Test	Disaster Recovery (Optional)	Production
Connection DNS:			
Connection Public IP Address:			

The following IP Addresses are not allowed:

10.0.0.0 - 10.255.255.255 172.16.0.0 - 172.31.255.255 192.168.0.0 - 192.168.255.255

*Provide Your Transmitter Server Requirements:

	Test	Disaster Recovery (Optional)	Production
*File Directory / Navigational Path: (Indicate the navigational path after logged into your server to place files on your server)			
*Required File Name(s): (USBank's standard filename convention will be used unless you specify otherwise here. The unique filename will be provided to you during testing.) (Multiple File Names can be listed)			
* U.S. Bank User ID on your Server:			

*Port Number : (ex TCP Port 22)			
*Your Operating System Platform: ☐ Windows ☐ Unix ☐ Other: (Provide Name)			

Data Transmission Questionnaire Instructions

The purpose of the U.S. Bank Data Transmission Questionnaire Instructions document is to help you complete the U.S. Bank Data Transmission Questionnaire for establishing a file transmission with U.S. Bank.

U.S. Bank Representative

The purpose of this section is to identify your U.S. Bank Representative.

Customer Contact Information

The purpose of this section is to obtain information about your company.

Company Name: (Required) Your company's name.
Mailing Address: (Required) Your company's mailing address.
Contact Name and Phone Number: (Required) The name of the individual and phone number who will work with U.S. Bank as the lead implementation contact for this transmission request.
Email Address: (Required) The Implementation Contact email address for this transmission request.
Authorization to Share Credentials Required if using a third party transmitter. Check Yes to indicate that the login credentials to access your files will be provided directly to your third party transmitter. If No is checked, the credentials will be provided only to the Customer.
Authorization Name Enter the name and company of the person authorizing the sharing of the aforementioned credentials.

Transmitter Information

The purpose of this section is to obtain information about the transmitter who will be responsible for sending files to or receiving files from U.S. Bank.

Same As Customer Contact Information Above: Select this box if the customer named above will be transmitting the files. Fields within this section only required if using third party transmitter.
Transmitter Company Name: (Required) If the check box above is not selected, then this information is required. Enter the transmitter company name. This can be a third party provider.
Mailing Address: (Required) Enter the transmitter mailing address.
City, State, and Zip Code: (Required) Enter the City, State and Zip Code for the transmitter.
Contact Name and Phone Number: (Required) Enter the primary contact name and phone number information for the transmitter
Email Address: (Required) Enter the primary contact email address information for the transmitter.

Transmission Method

The purpose of this section is to obtain information about the type of transmission being established and to provide information about existing transmissions between your company and U.S. Bank.

Do you require assistance to determine a Transmission Method? (Required) Select Yes, if you need assistance determining the transmission method for this request. Provide your contact name, email and phone number and U.S. Bank will contact you to review Transmission Method options.
Transmission Protocol Options: (Required) Select the protocol desired for the transmission. Refer to Appendix A for an overview of the available protocol types from U.S. Bank.
Do you require PGP Encryption? (Required) Select Yes, if you require PGP Encryption for this request. Select No, (Default) if you do not require PGP Encryption. Additional fees may apply. Transmission Protocol Options that support PGP are identified in Appendix A.
Operating System If PGP is required, indicate your Operating System
Do you require a Date/Time stamp for files received from U.S. Bank? (Required) Select Yes – Standard Format (Default), if you require the Standard YYYYMMDD.HHMMSS date and time stamp for this request. Select Yes – Custom, if you require a date and time stamp different from the standard option. Customer must provide a date and time format other than the standard option. Select No, if Date and Time stamp not required. Date and time stamp may be added to the end of a file name providing the date and time that the file is added to the Mailbox.

Provide existing Mailbox or User ID with U.S. Bank, if known:

(Required) If you are aware of existing transmissions with U.S. Bank provide your Mailbox / User ID. If you have an existing mailbox ID, indicate whether that ID should be used or a new one created.

File Transmission Contacts

The purpose of this section is to obtain information about the individuals who will be responsible for testing connectivity, testing file format and production support for transmissions to and from U.S. Bank.

Transmission Connectivity Testing Contacts:

(Required) Enter the primary and secondary contact information of the individuals responsible for testing the connectivity between U.S. Bank and your company.

File Format Testing Contacts:

(Required) Enter the primary and secondary contact information of the individuals responsible for validating file format and content of the transmission between U.S. Bank and your company.

Same as above checkbox:

Select this box if the File Format Testing Contact is the same as the Transmission Connectivity Testing Contact.

Transmission Production Support Contacts:

(Required) Enter the primary and secondary contact information of the individuals / Group responsible for production issues once the transmission is established.

Same as above checkbox:

Select this box if the Transmission Production Support Contact is the same as the Transmission Connectivity Testing Contact.

Comments

The purpose of this area is to communicate any information U.S. Bank should be aware of regarding the transmission request.

U.S. Bank FTPS (SSL) Transmission Questionnaire Instructions for Appendix B

The purpose of Appendix B: U.S. Bank FTPS (SSL) Transmission Questionnaire is to gather the information necessary to implement your FTPS (SSL) protocol method with U.S. Bank.

Transmitter Information

- Transmitter Company Name:** (Required) Enter the name of the company who will be transmitting the files.
- Do you require U.S. Bank to push files out to your server?** (Required) Select Yes if U.S. Bank will push out files to your server. Section 2 must be completed. Select No if files will be picked up (pulled) by your transmitter or if U.S. Bank is not sending files to your transmitter.

Section 1: U.S. Bank Server Information

The purpose of this section is to provide U.S. Bank's test, production, and disaster recovery server information.

Section 2: Transmitter Server Information

The purpose of this section is to obtain information about the transmitters' server information.

- Connection DNS Name:** Provide domain name server or URL if used for Test, Disaster Recovery and Production. Only required if your site uses DNS Naming.
- Connection Public IP Address:** (Required) Provide server IP address(es) for Test, Disaster Recovery and Production.
- Control Port Number:** (Required) Provide your control port information for Test, Disaster Recovery and Production.
- Server SSL Certificate Self Sign:** (Required) Select Yes if using a Self-Signed Certificate. U.S. Bank supports both SSL Certificate Self-Sign and trusted third party Certificate Authority.
- If not Self Signed, specify Certificate Authority:** Provide the name of Certificate Authority.
- FTP Data Transfer Mode:** Must be Passive Mode when you connect to U.S. Bank.
- Secure Method:** Only Explicit Mode is supported by U.S. Bank.

Transmitter Server Requirements

The purpose of this section is to obtain information about the transmitters' server information if U.S. Bank needs to push files. If U.S. Bank will push files to your server, the information in this table must be filled in.

- Directory / Navigational Path:** Provide the directory path for your Test, Disaster Recovery and Production sites.
- Required File Name(s):** Provide the static file name on your server for Test, Disaster Recovery and Production sites.
- U.S. Bank's User ID for your Server:** Provide the User ID on your server for your Test, Disaster Recovery and Production sites. Passwords are not exchanged on this form, and must be provided over the phone.
- Control Port Number:** Provide communication control port information for your Test, Disaster Recovery and Production sites.
- Operating System Platform:** Provide the name of your Operating System Platform. If the Operating System Platform is not listed, provide the name.
- Data Port Range:** Provide your data port range.
- FTP Data Transfer Mode:** Select Passive or Active.
- Your Data Port Range:** **NOTE:** FTP Data Transfer Mode must be Passive for you to connect to U.S. Bank. Provide your Data Port Range

U.S. Bank SFTP (SSH) Transmission Questionnaire Instructions for Appendix C

The purpose of the U.S. Bank SFTP (SSH) Transmission Questionnaire Instructions document is to help you complete the U.S. Bank SFTP (SSH) Transmission Questionnaire for establishing your SFTP (SSH) protocol method with U.S. Bank.

Transmitter Information

- Transmitter Company Name:** (Required) Enter the name of the company who will be transmitting the files.
- Do you require U.S. Bank to push files out to your server?** (Required) Select Yes if U.S. Bank will push out files to your server. Sections 1 and 2 must be completed. Select No if files will be picked up (pulled) by your transmitter or if U.S. Bank is not sending files to your transmitter. Section 1 must be completed.

Section 1: U.S. Bank Server Information

The purpose of this section is to provide U.S. Bank's test, production, and disaster recovery server information.

- Your required type of Security Authentication?** (Required) Select your SSH security authentication method, either SSH Public Key, Non-expiring Password or Expiring Password.

Section 2: Transmitter Server Information

The purpose of this section is to obtain information about the transmitters' server information.

- Connection DNS Name:** Provide domain name server or URL if used for Test, Disaster Recovery and Production. Only required if your site uses DNS Naming.
- Connection Public IP Address:** (Required) Provide server IP address(es) for Test, Disaster Recovery and Production.

Transmitter Server Requirements

The purpose of this section is to obtain information about the transmitters' server information if U.S. Bank needs to push files. If U.S. Bank will push files to your server, the information in this table must be filled in.

- Directory / Navigational Path:** Provide the directory path for your Test, Disaster Recovery and Production sites.
- Required File Name(s):** Provide the static file name on your server for Test, Disaster Recovery and Production sites.
- U.S. Bank's User ID for your Server:** Provide the User ID on your server for your Test, Disaster Recovery and Production sites. Passwords are not exchanged on this form, and must be provided over the phone.
- SFTP Control Port Number:** Provide communication control port information for your Test, Disaster Recovery and Production sites.
- Operating System Platform:** Provide the name of your Operating System Platform. If the Operating System Platform is not listed, provide the name.
- Your planned firewall update date (if applicable):** Provide the date that changes to your firewall will be made for file transmissions with U.S. Bank.