

Organisation Name	Scope	Date Completed	Next Review Date
<i>Organisation Name</i>	<i>Define the boundaries of your assessment and what it will capture e.g. a specific event, business as usual</i>	<i>Date of completion</i>	<i>Date of next review</i>

PART I: THREAT ASSESSMENT

Attack type	Selected	Rationale	Existing controls
Marauding attacker (MTA)	Yes <input type="checkbox"/> No <input type="checkbox"/>	<i>Briefly outline how this threat is relevant (or not relevant) to your business</i>	<i>Provide a brief overview of the existing controls you have in place to control the risks associated with this threat</i>
Vehicle as Weapon (VAW)	Yes <input type="checkbox"/> No <input type="checkbox"/>		
Fire as Weapon (FAW)	Yes <input type="checkbox"/> No <input type="checkbox"/>		
Improvised Explosive Device (IEDs)	Yes <input type="checkbox"/> No <input type="checkbox"/>		
Chemical, biological, radiological attack (CBR)	Yes <input type="checkbox"/> No <input type="checkbox"/>		
Cyber-attack	Yes <input type="checkbox"/> No <input type="checkbox"/>		

PART II: VULNERABILITY ASSESSMENT

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Vulnerability	Threat	Event	Consequences
<i>Describe the vulnerability</i>	<i>Record applicable threat(s)</i>	<i>Describe what could go wrong</i>	<i>Describe what will happen as a result</i>