



## Physical Security Services

Securing People & Spaces.

### Client Intake Questionnaire

**Question. Qualify. Quantify.**

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#### Instructions

Please complete this questionnaire as thoroughly as possible prior to your Discovery Session. Your responses help us understand your current landscape and tailor our assessment to your specific needs.

If a question does not apply, please write "N/A". If you are unsure, provide your best estimate — we will validate all data during our assessment phase.

**Estimated completion time: 45–60 minutes**

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*Building smarter, more resilient systems by aligning technology, people and strategy. Unleashing potential at every level.*

**CONFIDENTIAL**

## Section A: Organization Information

Organization Name: \_\_\_\_\_

Primary Contact: \_\_\_\_\_

Title / Role: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Industry / Vertical: \_\_\_\_\_

Organization Size: \_\_\_\_\_

Headquarters: \_\_\_\_\_

Website: \_\_\_\_\_

Annual Revenue: \_\_\_\_\_

Security Budget: \_\_\_\_\_

Describe your organization and what prompted this engagement:

\_\_\_\_\_

\_\_\_\_\_

## ■ PROPERTY PROFILING — Classification & Overview

Property Type:

■ Corporate Office

■ Industrial / Warehouse

■ Manufacturing

■ Retail / Storefront

■ Data Centre

■ Healthcare

■ Educational Campus

■ Multi-Tenant Building

■ Residential / Mixed-Use

■ Construction Site

■ Event Venue

■ Government / Civic

■ Hospitality / Hotel

■ Religious / Worship

■ Other

If Other, specify: \_\_\_\_\_

# Properties to Assess: \_\_\_\_\_

# Buildings Per Property: \_\_\_\_\_

Property Age (Yrs): \_\_\_\_\_

Primary Property Address: \_\_\_\_\_

Total Sq. Footage: \_\_\_\_\_

# Floors / Stories: \_\_\_\_\_

Basement Levels: \_\_\_\_\_

Construction Type: \_\_\_\_\_

Ownership (Own / Lease): \_\_\_\_\_

Construction Material:

■ Steel Frame

■ Concrete / Block

■ Wood Frame

■ Brick / Masonry

■ Glass Curtain Wall

■ Pre-Fab / Modular

■ Mixed / Other

Operating Hours: \_\_\_\_\_

After-Hours Activity: \_\_\_\_\_

# Employees On-Site: \_\_\_\_\_

# Daily Visitors: \_\_\_\_\_

Shifts (Single/Multiple): \_\_\_\_\_

Shift Times: \_\_\_\_\_

Multi-Tenant? (Y/N): \_\_\_\_\_

# of Tenants: \_\_\_\_\_

Neighbourhood, surrounding area, environmental risks (flood, crime, hazards, critical infrastructure):

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## ■ STRUCTURAL INVENTORY — Entry Points, Doors & Openings

Entry & Exit Points (count and notes for each):

| Element                      | # | Notes / Details |
|------------------------------|---|-----------------|
| Main / Front Entrances       |   |                 |
| Side / Secondary Entrances   |   |                 |
| Rear / Back Entrances        |   |                 |
| Emergency Exits (Fire Exits) |   |                 |
| Loading Docks / Receiving    |   |                 |
| Service / Utility Entrances  |   |                 |
| Garage / Parking Entries     |   |                 |
| Pedestrian Gates (Perimeter) |   |                 |
| Roof Access Points           |   |                 |

Doors Inventory:

| Element                           | # | Notes |
|-----------------------------------|---|-------|
| Exterior Doors — Steel/Metal      |   |       |
| Exterior Doors — Wood/Solid       |   |       |
| Exterior Doors — Glass/Storefront |   |       |
| Overhead / Roll-Up (Garage)       |   |       |
| Roll-Up Doors (Loading Dock)      |   |       |
| Interior Secure / Controlled      |   |       |
| Stairwell Doors (Per Stairwell)   |   |       |
| Elevator Count                    |   |       |
| Vault / Safe Room Doors           |   |       |

Windows & Openings:

| Element                 | # | Notes |
|-------------------------|---|-------|
| Ground Floor — Operable |   |       |
| Ground Floor — Fixed    |   |       |
| Upper Floor — Operable  |   |       |

|                                  |  |  |
|----------------------------------|--|--|
| Upper Floor — Fixed              |  |  |
| Basement / Below-Grade           |  |  |
| Skylights / Roof Openings        |  |  |
| Storefront / Display (Linear Ft) |  |  |
| Drive-Through / Service          |  |  |
| Ventilation Openings / Louvers   |  |  |

**Glass Types Present:**

- ☐ Standard
 ☐ Tempered
 ☐ Laminated
 ☐ Security Film
 ☐ Bullet-Resistant
 ☐ Wire-Reinforced
 ☐ Unknown

**Known structural vulnerabilities, aging concerns, or areas needing repair:**


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## **■ PERIMETER, PARKING & GROUNDS**

**Perimeter Fencing:**

- ☐ Chain-Link
 ☐ Ornamental / Iron
 ☐ Concrete / Block Wall
 ☐ Anti-Climb / Razor Wire
 ☐ Wooden Fence
 ☐ Bollards
 ☐ Natural Barrier
 ☐ No Fencing
 ☐ Other

**Fence Height:**


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**Fence Condition:**


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**# Vehicle Gates:**


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**# Pedestrian Gates:**


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**Gate Type:**


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**Gate Access Method:**


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**Perimeter Detection?**


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**Parking & Vehicle Access:**
**Parking Type:**

- ☐ Surface (Open)
 ☐ Surface (Gated)
 ☐ Covered Structure
 ☐ Underground
 ☐ Street Only
 ☐ Valet / Controlled
 ☐ No Parking

**# Parking Levels:**


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**Total Spaces:**


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**Parking Gated? (Y/N):**


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**Gate/Barrier Type:**


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**Parking Lighting:**


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**# Parking Cameras:**


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**Emergency Call Stations?**


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Parking security concerns (break-ins, safety, lighting, blind spots):

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### Grounds & Environment:

Exterior Lighting Type:

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Motion-Activated?

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Dark Zones / Problems:

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Landscaping  
Concealment?

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Adjacent properties, shared boundaries, sight-line concerns:

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## Section E: Current Access Control Systems

### Access Control Methods:

☐ Key Cards / Fobs

☐ Biometric (Fingerprint)

☐ Biometric (Facial)

☐ PIN / Keypad

☐ Traditional Keys

☐ Mobile Credentials

☐ Turnstiles / Mantraps

☐ Intercom / Buzzer

☐ Visitor Mgmt System

☐ No Formal Control

AC Vendor:

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System Age (Yrs):

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# Controlled Doors:

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# Uncontrolled Entry Pts:

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Key / Credential Mgmt:

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Master Key System? (Y/N):

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Visitor Check-In:

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Visitor Badge System:

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After-Hours Access Protocol:

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Known access control gaps, concerns, or incidents:

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## Section F: Surveillance & Monitoring Systems

### Surveillance Systems:

☐ CCTV / IP Cameras

☐ Analog Cameras

☐ Intrusion Alarm

☐ Motion Sensors

☐ Glass Break Sensors

☐ Door/Window Contacts

☐ Central Monitoring

☐ On-Site Guards

☐ Contract Guards

☐ AI / Analytics

☐ License Plate Recog.

☐ No Surveillance

|                                                             |       |                               |       |
|-------------------------------------------------------------|-------|-------------------------------|-------|
| # Interior Cameras:                                         | _____ | # Exterior Cameras:           | _____ |
| Camera Vendor:                                              | _____ | System Age:                   | _____ |
| Video Retention:                                            | _____ | Storage (Local/Cloud/Hybrid): | _____ |
| Monitoring Schedule:                                        | _____ |                               | _____ |
| Alarm Provider:                                             | _____ | Alarm Response Protocol:      | _____ |
| Known surveillance gaps, blind spots, or coverage concerns: |       |                               |       |
| _____                                                       |       |                               |       |
| _____                                                       |       |                               |       |

## Section G: Workplace Safety & Emergency Preparedness

|                                                                        |                                            |                                             |
|------------------------------------------------------------------------|--------------------------------------------|---------------------------------------------|
| Emergency Response Plan?                                               | _____                                      |                                             |
| Evacuation Procedures?                                                 | _____                                      |                                             |
| Last Emergency Drill:                                                  | Drill Frequency: _____                     |                                             |
| Assembly Point?                                                        | # Fire Wardens: _____                      |                                             |
| Emergency Equipment:                                                   |                                            |                                             |
| <input type="checkbox"/> Fire Alarm                                    | <input type="checkbox"/> Sprinkler (Wet)   | <input type="checkbox"/> Sprinkler (Dry)    |
| <input type="checkbox"/> AED                                           | <input type="checkbox"/> First Aid Kits    | <input type="checkbox"/> Emergency Lighting |
| <input type="checkbox"/> Generator                                     | <input type="checkbox"/> UPS               | <input type="checkbox"/> Mass Notification  |
| <input type="checkbox"/> PA / Intercom                                 | <input type="checkbox"/> Safe Room         | <input type="checkbox"/> Panic Buttons      |
| <input type="checkbox"/> Active Threat Protocol                        | <input type="checkbox"/> Crisis Comms Plan | <input type="checkbox"/> Weather Alert      |
| Fire Suppression Vendor:                                               | Last Fire Inspection: _____                |                                             |
| Active Threat Training?                                                | _____                                      |                                             |
| Safety incidents, near-misses, or emergency concerns (past 24 months): |                                            |                                             |
| _____                                                                  |                                            |                                             |
| _____                                                                  |                                            |                                             |

## Section H: Security Personnel & Operations

|                                   |                                   |                               |                               |
|-----------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| Security Team Size:               | _____                             | Security Lead:                | _____                         |
| Reports To:                       | _____                             | Security Budget:              | _____                         |
| Guard Service:                    |                                   |                               |                               |
| <input type="checkbox"/> In-House | <input type="checkbox"/> Contract | <input type="checkbox"/> Both | <input type="checkbox"/> None |
| Guard Provider:                   | _____                             | Contract Expiry:              | _____                         |

Guard Hours: \_\_\_\_\_ # Guard Posts: \_\_\_\_\_

Guard KPIs Monitored? \_\_\_\_\_

Background Checks? \_\_\_\_\_

Security Awareness Training? \_\_\_\_\_

Workplace Violence Prevention? \_\_\_\_\_

Executive Protection Needs? \_\_\_\_\_

Overall security culture description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Section I: Security Goals & Priorities

Top 3 Physical Security Priorities (Next 12 Months):

\_\_\_\_\_

\_\_\_\_\_

What does success look like for this engagement?

\_\_\_\_\_

\_\_\_\_\_

Specific concerns, incidents, or regulatory pressures driving engagement?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Urgency Assessment — Rate 1 (Not Urgent) to 5 (Critical):**

|                                     | 1 | 2 | 3 | 4 | 5 |
|-------------------------------------|---|---|---|---|---|
| Physical Risk Assessment & Strategy | ■ | ■ | ■ | ■ | ■ |
| Access Control & Perimeter Security | ■ | ■ | ■ | ■ | ■ |
| Surveillance & Monitoring           | ■ | ■ | ■ | ■ | ■ |
| Workplace Safety & Emergency Prep   | ■ | ■ | ■ | ■ | ■ |
| Executive & Personnel Protection    | ■ | ■ | ■ | ■ | ■ |
| Security Operations & Governance    | ■ | ■ | ■ | ■ | ■ |

## Authorization & Sign-Off

By signing below, I confirm that the information provided is accurate to the best of my knowledge. I authorize rethinQ Solutions to use the information and access the platforms referenced in this document for the purposes of our engagement.

**Signature:**

\_\_\_\_\_

**Date:**

\_\_\_\_\_

**Printed Name:**

\_\_\_\_\_

**Title:**

\_\_\_\_\_