



Swedish Social Insurance Agency Hardware X.509 Certificate Policy

Key Information:

Formal title: Swedish Social Insurance Agency Hardware X.509 Certificate Policy

OID: 1.2.752.146.2.4 [.0.0.1]
{ iso (1) member (2) sweden (752) swedish social insurance agency (146)
ssia HWCAv4 (2.1) [cpvn-top (0) cpvn-2nd (0) cp (1)] }

Responsible authority: Försäkringskassan Infrastructure Management Authority

Version: 4.1.0

Effective date: 2016-03-15

Classification /
Distribution: Un-classified /
Unlimited distribution

Published at: <http://www.myndighetsca.se/cps/>

Author: Richard G. Wilsher, Zyigma LLC

PMA Point-of-Contact: Försäkringskassan Infrastructure Management
Försäkringskassan, SE-851 93 Sundsvall, Sweden
email: MCA@forsakringskassan.se
tel: +46 70 208 44 63

APPROVALS

Each formal release of this Certificate Policy (CP) requires approval by the board of Policy Management Authority for the Swedish Social Insurance Agency, whose signature shall be applied to an electronic PDF version of it.

Approval control:

Version identification has three levels requiring the approval authority identified below according to level. Version identification is a simple integer sequencing at each level.

- Top-level: A formal release of this CP which has a **significant policy change** requiring a change of the policy's OID;
- Second-level: A formal release of this CP which has a **no significant policy change** and therefore does NOT require a change of the policy's OID;
- Third-level: A draft of this CP intended for review and/or recommendation as the next formal release.

When the identification at a given level is incremented all subordinate levels revert to zero. Only the first two levels need be shown in formal releases (level three is by default zero in any formal release). During the drafting of revisions this record shall record all draft versions and their approvals until such time as a formal release is approved. Records of ALL past drafting releases shall be preserved within the Försäkringskassan Infrastructure Management Authority (SSIA PMA) for archival purposes.

On its effective date a formal version of this CP shall become the applicable version of the policy for all operational purposes and shall supersede all previous versions which shall thereby become redundant. The SSIA PMA shall preserve records of all past versions.

Approval authorities:

- Top-level: Försäkringskassan Infrastructure Manager & IT Production Manager for SSIA;
- Second level: As top-level;
- Third level: Author / Editor – for informal PMA member and development / editorial team review.

Approval record:

Version	Approval date	Approved (rôle)	Approved (name)	Reason / notes
4.1.0	2016-03-15	SSIA PMA	SSIA PMA Board	Approved
4.0.3	2016-02-29	SSIA PMA		Clarification
4.0.2	2016-02-25	SSIA PMA		Clarification
4.0.1	2016-02-23	SSIA PMA		Changed to version 4 of HW CA
3.0.1	2015-11-05	SSIA PMA		
3.0.0	2015-09-10	SSIA PMA		
2.0.0	2015-05-04	SSIA PMA	SSIA PMA Board	Final version

CONTENTS

1. INTRODUCTION	11
1.1. Overview	11
1.1.1. Certificate Policy	11
1.1.2. Certification Practice Statement	11
1.1.3. Scope of Applicability	11
1.2. Document Identification	12
1.3. PKI Participants	13
1.3.1. Certification Authorities	13
1.3.2. Registration Authorities (Agency Server Administrators)	14
1.3.3. Subscribers (Agency Administrators)	14
1.3.4. Relying Parties	15
1.3.5. Other Participants	15
1.4. Certificate Usage	15
1.4.1. Appropriate Certificate Uses	15
1.4.2. Prohibited Certificate Uses	15
1.5. Policy Administration	16
1.5.1. Organization Administering the Document	16
1.5.2. Contact Person	16
1.5.3. Person determining CPS suitability for the policy	16
1.5.4. CP Approval Procedures	16
1.6. Definitions and Acronyms	16
2. PUBLICATION AND REPOSITORY RESPONSIBILITIES	16
2.1. Repositories	16
2.2. Publication of Certification Information	17
2.3. Information Availability	17
2.4. Repository Access Controls	17
3. IDENTIFICATION AND AUTHENTICATION	17
3.1. Naming	17
3.1.1. Names Types	17
3.1.2. Need for Names to be meaningful	17
3.1.3. Anonymity or Pseudonymity of Subscribers	17
3.1.4. Name Forming Rules	17
3.1.5. Name Uniqueness	17
3.1.6. Recognition, Authentication, and Rôle of Trademarks	18
3.2. Initial Identity Validation	18
3.2.1. Method to Prove Possession of Private Key	18
3.2.2. Authentication of Organization Identity	18
3.2.3. Authentication of Individual Identity	18
3.2.4. Non-verified Subscriber information	18

3.2.5. Validation of Authority.....18

3.2.6. Criteria for inter-operation.....18

3.3. Identification and Authentication for Re-Key Requests18

3.4. Identification and Authentication for Revocation Request19

4. CERTIFICATE LIFE-CYCLE OPERATIONAL REQUIREMENTS..... 19

4.1. Certificate Application19

4.1.1. Who Can Submit a Certificate Request19

4.1.2. Enrolment Process and Responsibilities19

4.2. Certificate Application Processing19

4.2.1. Performing Identification and Authentication Functions19

4.2.2. Approval or Rejection of Certificate Application19

4.2.3. Time to Process Certificate Application.....19

4.3. Certificate Issuance.....19

4.3.1. CA Actions during Certificate Issuance19

4.3.2. Notification to Subject by the CA of Issuance of Certificate.....19

4.4. Certificate Acceptance.....20

4.4.1. Conduct Constituting Certificate Acceptance20

4.4.2. Publication of the Certificate by the CA.....20

4.4.3. Notification of Certificate Issuance by the CA to Other Entities20

4.5. Key Pair and Certificate Usage.....20

4.5.1. Subscriber Private Key and Certificate Usage20

4.5.2. Relying Party Public Key and Certificate Usage.....20

4.6. Certificate Renewal.....20

4.6.1. Circumstance for Certificate Renewal20

4.6.2. Who May Request Renewal20

4.6.3. Processing Certificate Renewal Requests20

4.6.4. Notification of New Certificate Issuance to Subscriber20

4.6.5. Conduct Constituting Acceptance of a Renewal Certificate.....20

4.6.6. Publication of the Renewal Certificate by the CA20

4.6.7. Notification of Certificate Issuance by the CA to Other Entities20

4.7. Certificate Re-Key20

4.7.1. Circumstance for Certificate Re-key20

4.7.2. Who May Request Certificate Re-key20

4.7.3. Processing Certificate Re-key Requests20

4.7.4. Notification of Certificate Re-key to Subject21

4.7.5. Conduct Constituting Acceptance of a Re-keyed Certificate21

4.7.6. Publication of the Issued Certificate by the CA.....21

4.7.7. Notification of Certificate Issuance by the CA to Other Entities21

4.8. Certificate Modification21

4.8.1. Circumstance for Certificate Modification21

4.8.2. Who May Request Certificate Modification21

4.8.3. Processing Certificate Modification Requests21

4.8.4. Notification of Certificate Modification to Subscriber21

- 4.8.5. Conduct Constituting Acceptance of a Modified Certificate21
- 4.8.6. Publication of the Modified Certificate by the CA.....21
- 4.8.7. Notification of Certificate Modification by the CA to Other Entities.....21
- 4.9. Certificate Revocation and Suspension..... 21**
 - 4.9.1. Circumstances for Revocation21
 - 4.9.2. Who Can Request Revocation22
 - 4.9.3. Procedure for Revocation Request22
 - 4.9.4. Revocation Request Grace Period23
 - 4.9.5. Time within which CA Must Process the Revocation Request23
 - 4.9.6. Revocation Checking Requirement for Relying Parties23
 - 4.9.7. CRL Issuance Frequency.....23
 - 4.9.8. Maximum Latency for CRLs23
 - 4.9.9. On-line Revocation/Status Checking Availability23
 - 4.9.10. On-line Revocation Checking Requirements23
 - 4.9.11. Other Forms of Revocation Advertisements Available.....23
 - 4.9.12. Special Requirements Related to Key Compromise23
 - 4.9.13. Circumstances for Suspension.....23
 - 4.9.14. Who Can Request Suspension23
 - 4.9.15. Procedure for Suspension Request.....23
 - 4.9.16. Limits on Suspension Period.....23
- 4.10. Certificate Status Services..... 24**
 - 4.10.1. Operational Characteristics.....24
 - 4.10.2. Service Availability24
 - 4.10.3. Optional Features24
- 4.11. End of Subscription 24**
- 4.12. Key Escrow and Recovery..... 24**
 - 4.12.1. Key Escrow and Recovery Policy Practices24
 - 4.12.2. Session Key Encapsulation and Recovery Policy and Practices.....24
- 5. MANAGEMENT, OPERATIONAL AND PHYSICAL CONTROLS 24**
 - 5.1. Physical Controls..... 24**
 - 5.1.1. Site Location and Construction24
 - 5.1.2. Physical Access24
 - 5.1.3. Power and Air Conditioning.....25
 - 5.1.4. Water Exposure25
 - 5.1.5. Fire Prevention and Protection.....25
 - 5.1.6. Media Storage25
 - 5.1.7. Waste Disposal.....25
 - 5.1.8. Off-site Back-up25
 - 5.1.9. CMS and External RA Systems25
 - 5.2. Procedural Controls..... 25**
 - 5.2.1. Trusted Rôles25
 - 5.2.2. Number of Persons Required per Task.....26

5.2.3.	Identification and Authentication for each Rôle	26
5.2.4.	Rôles Requiring Separation of Duties	26
5.3.	Personnel Controls.....	26
5.3.1.	Qualifications, Experience, and Clearance Requirements.....	26
5.3.2.	Background Check Procedures	27
5.3.3.	Training Requirements	27
5.3.4.	Retraining Frequency and Requirements.....	27
5.3.5.	Job Rotation Frequency and Sequence	27
5.3.6.	Sanctions for Unauthorized Actions	27
5.3.7.	Independent Contractor Requirements	27
5.3.8.	Documentation Supplied to Personnel.....	28
5.4.	Audit Logging Procedures	28
5.4.1.	Types of Events Recorded.....	28
5.4.2.	Frequency of Processing Log	30
5.4.3.	Retention Period for Audit Log	31
5.4.4.	Protection of Audit Log	31
5.4.5.	Audit Log Back-up Procedures	31
5.4.6.	Audit Collection System (internal vs. external)	31
5.4.7.	Notification to Event-causing Subject.....	31
5.4.8.	Vulnerability Assessments	31
5.5.	Records Archival	32
5.5.1.	Types of Records Archived.....	32
5.5.2.	Retention Period for Archive	32
5.5.3.	Protection of Archive	32
5.5.4.	Archive Back-up Procedures	33
5.5.5.	Requirements for Time-stamping of Records.....	33
5.5.6.	Archive Collection System (internal or external).....	33
5.5.7.	Procedures to Obtain and Verify Archive Information.....	33
5.6.	Key Changeover.....	33
5.7.	Compromise and Disaster Recovery	33
5.7.1.	Incident and Compromise Handling Procedures	33
5.7.2.	Computing Resources, Software, and/or Data Are Corrupted	33
5.7.3.	Entity Private Key Compromise Procedures	33
5.7.4.	Business Continuity Capabilities after a Disaster	34
5.8.	CA or RA Termination	34
6.	TECHNICAL SECURITY CONTROLS	34
6.1.	Key Pair Generation and Installation	34
6.1.1.	Key Pair Generation	34
6.1.2.	Private Key Delivery to Subscriber.....	34
6.1.3.	Private Key Delivery to Certificate Issuer	35
6.1.4.	CA Public Key Delivery to Relying Parties	35
6.1.5.	Key Sizes	35

- 6.1.6. Public Key Parameters Generation and Quality Checking.....35
- 6.1.7. Key Usage Purposes (as per X.509 v3 key usage field)35
- 6.2. Private Key Protection and Cryptographic Module Engineering Control..... 36**
 - 6.2.1. Cryptographic Module Standards and Controls.....36
 - 6.2.2. Private Key ('n' from 'm') Multi-person Control36
 - 6.2.3. Private Key Escrow.....36
 - 6.2.4. Private Key Back-up36
 - 6.2.5. Private Key Archival.....36
 - 6.2.6. Private Key Transfer into or from a Cryptographic Module36
 - 6.2.7. Private Key Storage on Cryptographic Module.....36
 - 6.2.8. Method of Activating Private Key36
 - 6.2.9. Method of Deactivating Private Key36
 - 6.2.10. Method of Destroying Private Key37
 - 6.2.11. Cryptographic Module Rating.....37
- 6.3. Other Aspects of Key Pair Management..... 37**
 - 6.3.1. Public Key Archival37
 - 6.3.2. Certificate Operational Validity Periods and Key Pair Usage Validity Periods.....37
- 6.4. Activation Data..... 37**
 - 6.4.1. Activation Data Generation and Installation.....37
 - 6.4.2. Activation Data Protection.....37
 - 6.4.3. Other Aspects of Activation Data37
- 6.5. Computer Security Controls 38**
 - 6.5.1. Specific Computer Security Technical Requirements38
 - 6.5.2. Computer Security Rating.....38
- 6.6. Life Cycle Technical Controls 38**
 - 6.6.1. System Development Controls38
 - 6.6.2. Security Management Controls39
 - 6.6.3. Life Cycle Security Controls39
- 6.7. Network Security Controls 39**
- 6.8. Time-stamping..... 39**
- 7. CERTIFICATE AND CRL PROFILES 39**
 - 7.1. Certificate Profile 39**
 - 7.1.1. Version Number.....39
 - 7.1.2. Certificate Extensions39
 - 7.1.3. Algorithm Object Identifiers39
 - 7.1.4. Name Forms.....40
 - 7.1.5. Name Constraints40
 - 7.1.6. Certificate Policy Object Identifier40
 - 7.1.7. Usage of Policy Constraints Extension.....40
 - 7.1.8. Policy Qualifiers Syntax and Semantics40
 - 7.1.9. Processing Semantics for the Critical Certificate Policies Extension.....40
 - 7.2. CRL Profile 40**
 - 7.2.1. Version number(s)40

7.2.2. CRL and CRL Entry Extensions.....	40
7.3. OCSP PROFILE.....	40
7.3.1. Version Number(s)	40
7.3.2. OCSP Extensions.....	40
8. COMPLIANCE AUDIT AND OTHER ASSESSMENTS.....	41
8.1. Frequency or Circumstances of Assessment	41
8.2. Identity/Qualifications of Auditors.....	41
8.3. Assessor's Relationship to Assessed Entity	41
8.4. Topics covered by Assessment.....	41
8.5. Actions taken as a result of Deficiency.....	41
8.6. Communication of Results	42
8.7. Self-Audits	42
9. OTHER BUSINESS AND LEGAL MATTERS.....	42
9.1. Fees.....	42
9.2. Financial Responsibility	42
9.2.1. Insurance Coverage	42
9.2.2. Other Assets.....	42
9.2.3. Insurance or Warranty Coverage for End-Entities	42
9.3. Confidentiality of Business Information	42
9.3.1. Scope of Confidential Information.....	42
9.3.2. Information Not Within the Scope of Confidential Information	42
9.3.3. Responsibility to Protect Confidential Information	42
9.4. Privacy of Personal Information	42
9.4.1. Responsibility to Protect Private Information.....	42
9.4.2. Information Treated as Private.....	42
9.4.3. Information Not Deemed Private.....	42
9.4.4. Responsibility to Protect Private Information.....	43
9.4.5. Notice and Consent to Use Private Information.....	43
9.4.6. Disclosure Pursuant to Judicial or Administrative Process	43
9.4.7. Other Information Disclosure Circumstances	43
9.5. Intellectual Property Rights.....	43
9.6. Representations and Warranties	43
9.6.1. CA Representations and Warranties.....	43
9.6.2. RA Representations and Warranties.....	43
9.6.3. Subscriber Representations and Warranties.....	43
9.6.4. Relying Party Representations and Warranties.....	44
9.6.5. Representations and Warranties of Other Participants.....	44
9.7. Disclaimers of Warranties.....	44
9.8. Limitations of Liability.....	44
9.9. Indemnities	44
9.9.1. Indemnification by an SSIA HWCA	44
9.9.2. Indemnification by Subscribers	44
9.9.3. Indemnification by Relying Parties	44
9.10. Term and Termination	44
9.10.1. Term.....	44
9.10.2. Termination	44

9.10.3. Effect of Termination and Survival44

9.11. Individual Notices and Communications with Participants 44

9.12. Amendments..... 45

9.12.1. Procedure for Amendment.....45

9.12.2. Notification Mechanism and Period.....45

9.12.3. Circumstances under which OID Must Be Changed.....45

9.13. Dispute Resolution Provisions 45

9.14. Governing Law..... 45

9.15. Compliance with Applicable Law 45

9.16. Miscellaneous Provisions..... 45

9.16.1. Entire Agreement.....45

9.16.2. Assignment.....45

9.16.3. Severability45

9.16.4. Enforcement (attorneys' fees and waiver of rights)45

9.16.5. Force Majeure.....46

9.17. Other Provisions 46

9.17.1. Inter-Agency Agreement46

1. INTRODUCTION

1.1. Overview

All special terms and definitions addressed in §1.5.2 apply from hereon.

1.1.1. Certificate Policy

This document sets forth the Certificate Policy (CP) addressing the provision of server certificates by Försäkringskassan (SSIA), the Swedish government’s Social Insurance Agency (hereafter SSIA) to Swedish government agencies, and for the life-cycle management of those certificates. These certificates shall be issued from the ‘HW CA v4’. This policy is published under the authority of the SSIA Infrastructure Management Authority (SSIA PMA), whose executive mandate is defined in the SSIA PMA Charter [SSIA PMAcharter].

For public-facing references, the English-language title (and associated abbreviation) of SSIA shall be used.

1.1.2. Certification Practice Statement

This policy may be referenced by any Certification Practice Statement (CPS) fulfilling the obligations herein. Specifically, the SSIA Hardware Certification Practice Statement [SSIA HWCP] fulfils all the obligations of this policy.

1.1.3. Scope of Applicability

This CP covers SSIA’s Hardware Public Key Infrastructure (SSIA HWPKI) which issues Server Certificates to SSIA subscribers (Swedish government agencies). This CA doesn’t issue EV certificate. Figure 1 offers a schematic representation of the SSIA HWPKI and its relationship to its subscribers.

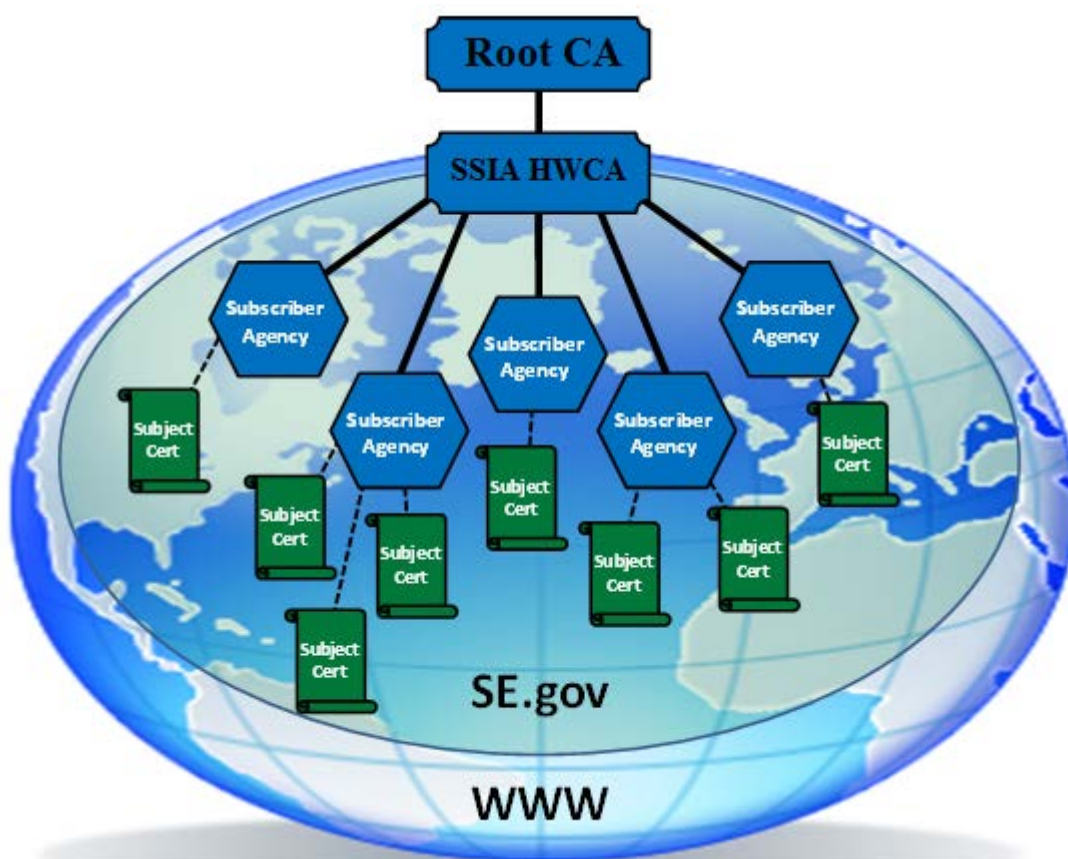


Figure 1 - Scope and Domain of the SSIA HWPKI

Certificates issued pursuant to this CP are intended for use solely within the Swedish government and its agencies, and their contracted service providers (hereafter assumed to be included within any reference to the government or its agencies), and there are no provisions within this CP for cross-certification or other forms of recognition or usage of certificates issued under this CP by or with certificates issued by other governments, other CAs or under any other PKIs.

Any use of or reference to this CP outside the purview of the SSIA HWPKI is therefore exercised completely at the using party’s own risk. Parties’ outwith the scope of this CP shall not assert the OIDs listed in Section 1.2 of this CP in any certificates they may issue.

This CP conforms to the Internet Engineering Task Force’s (IETF) RFC 3647, “Internet X.509 Public Key Infrastructure Certificate Policy and Certification Practice Statement Framework” of 2003-11 [RFC3647] and in particular observes the structure of §6 of [RFC3647], “Outline of a Set of Provisions”.

This CP also conforms to current version of the CA/Browser Forum’s “Baseline Requirements for the Issuance and Management of Publicly-Trusted Certificate” [CABF] (published at <http://www.CABForum.org>). In the event of any inconsistency between this CP and those Guidelines, the latter shall take precedence. SSIA also conforms to ISO/IEC 27001.

This CP presents a single level of identity assurance, that implied by conformity with [CABF]. The CP covers the issuance of three types of Certificate:

- a) Agency Client HW Certificates (having the purposes described in [CABF] §6.1.1 (1));
- b) Agency Server HW Certificates (having the purposes described in [CABF] §6.1.1 (1));
- c) Agency Encryption Certificates (having the purposes described in [CABF] §6.1.1 (2)).

1.2. Document Identification

The OID for the Swedish Social Insurance Agency’s HW CA v4 is derived thus:

SSia	::= { iso (1) member-body (2) sweden (752) swedish social insurance agency (146) } 1.2.752.146
ssiaRootCA	::= { ssia 1.0 } 1.2.752.146..03
ssia HWCA	::= { ssia 2.2 } 1.2.752.146.2.4

Policy OIDs addressed by this CP are:

ssia-HWclient	::= { ssia- HWCAv4 100 } 1.2.752.146.2.4.100
ssia-HWserver	::= { ssia- HWCA 200 } 1.2.752.146.2.4.200
ssia-HWencrypt	::= { ssia- HWCA 300 } 1.2.752.146.2.4.300
ssia-HW-EFS	::= { ssia- HWCA 400 } 1.2.752.146.2.4.400

In order to provide a discrete OID for this document and the corresponding CPS the following schema has been devised to identify the current formal release of these documents, as follows:

Current Formal Release:

Version x . y (.0)

ssia-HW CP	{ssia-HW_v4 cpvn-top cpvn-2nd } 1.2.752.146.2.4.x.y
ssia-HW CPS	{ssia-HW 2 } 1.2.752.146.2.4.x.y.1

These OID relationships are shown schematically in Figure 2, in context with other CAs falling under the authority of the SSIA PMA.

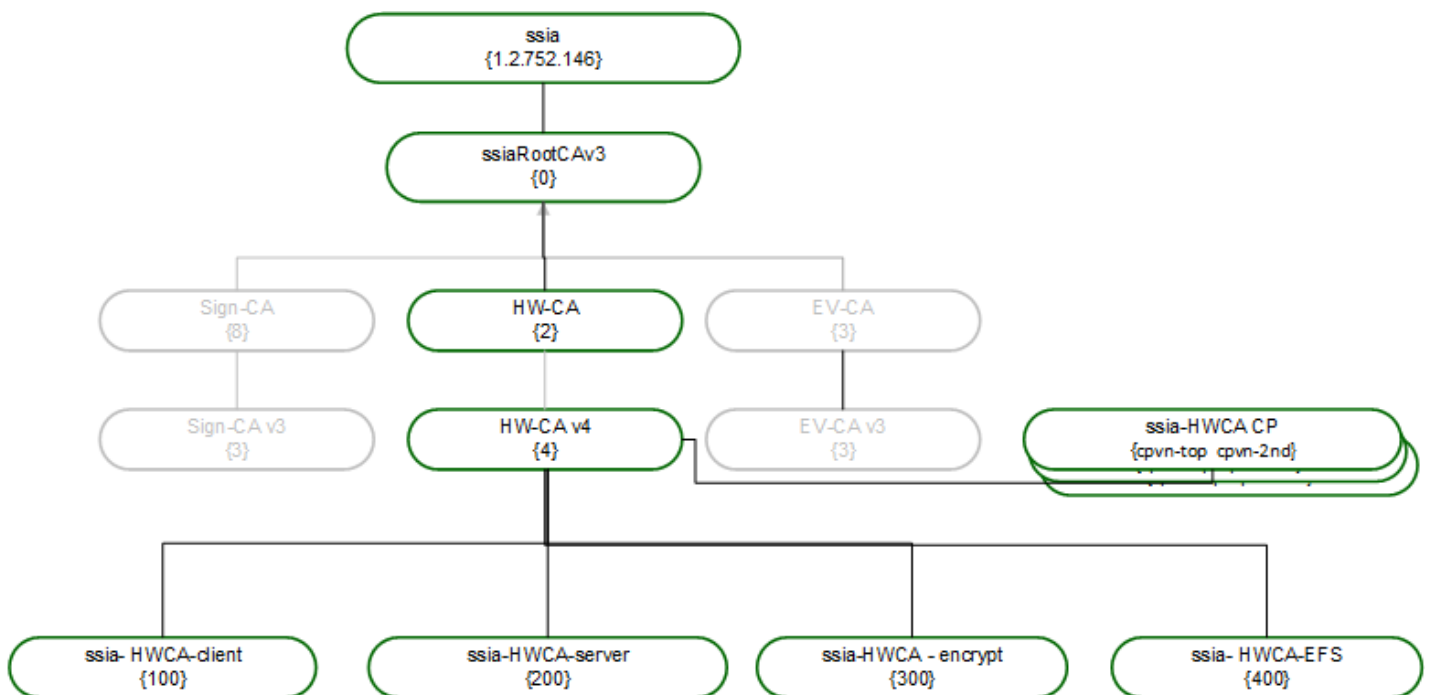


Figure 2 - SSIA PKI OID hierarchy

This CP shall apply to any entity asserting any of the above-defined policy OIDs.

1.3. PKI Participants

This section describes the rôles relevant to the administration and operation of the SSIA PKI.

1.3.1. Certification Authorities

1.3.1.1. SSIA Management Authority

The SSIA PMA shall report to SSIA IT Production Manager and shall be responsible for the following:

- a) Management of initial drafting and subsequent amendments to the SSIA CP;
- b) Review and approval of top-level versions of the SSIA CP, prior to them becoming operationally effective;
- c) Commissioning of audits of the policy management and operations of the SSIA HWPKI so as to maintain the certifications required by this CP; and
- d) Taking action to ensure policy-related audit recommendations are implemented.

The SSIA PMA shall be Chaired by the SSIA Infrastructure Manager who shall be appointed by the SSIA IT Production Manager. A complete description of SSIA PMA rôles and responsibilities is provided in [SSIA PMAcharter].

1.3.1.2. SSIA Policy Working Group

The SSIA Policy Working Group (SSIA PWG) is established to undertake developmental work and analysis, as follows:

- a) Identification and drafting of internally-originating proposals for changes to this CP;
- b) Review of received proposals for changes to this CP;
- c) Recommendations to the SSIA PMA for approval or rejection (by the SSIA PMA) of any such changes; and
- d) Compliance analysis and recommendations for approval (by the SSIA PMA) of [SSIA HWCPS] and any other CPS.

The SSIA PWG shall be chaired by the SSIA Infrastructure Manager.

1.3.1.3. SSIA Operational Authority

The SSIA Operational Authority (SSIA OA) shall be headed by the SSIA OA Manager who shall be appointed by and report to the SSIA IT Production Manager. The SSIA OA is responsible for the operation of the CA. This includes:

- a) Drafting, maintenance and submission for approval of the [SSIA HWCPS];
- b) Maintaining the currency of certificates and CRLs recorded in the SSIA PKI Repository (SSIA PKIR);
- c) Performing back-ups and ensuring the readiness of all back-up facilities;
- d) Ensuring the on-going availability of all CA services and facilities in accordance with [SSIA HWCPS]; and
- e) Taking action to ensure that audit recommendations concerning operational practices are implemented.

1.3.1.4. SSIA Portal Administrator

Portal Administrators (SSIA PortAdmin) shall be individuals assigned to the Operational Authority having responsibility for overseeing the proper operation of the SSIA HWCA including its configuration, the registration of Agency Administrators (see §1.3.2) and the verification of requests for certificate issuance and revocation. They may be assigned Trusted Rôles as defined in §5.2.1.

The SSIA PortAdmins shall be appointed by and report to the SSIA OA Manager.

1.3.1.5. Intermediate CA

There shall be no Intermediate CAs.

1.3.1.6. Root CA

There is a SSIA Root CA which issues the SSIA HWCA a certificate. Policy directives for this CA is in the scope of this document.

1.3.1.7. Intermediate CA

There shall be no Intermediate CAs.

1.3.1.8. Signing CA

This is the SSIA HWCA that issues Server certs to its Subscribers.

1.3.1.9. Certificate Status Authority

This is within the SSIA HWCA. Certificate responses are provided using CRL to provide certificate revocation status.

1.3.2. Registration Authorities (Agency Server Administrators)

Agency Server Administrators shall be individuals assigned to and appointed by their respective Agency Administrator (see §1.3.3). They shall be responsible for creating and submitting certificate requests, solely within their specific agency and in accordance with an Inter-Agency Agreement [IAA] which shall serve the purposes of a 'Subscriber Agreement' and 'Relying Party Agreement' (see §9.17.1).

This function fulfils the 'RA' rôle and it is they to whom the term 'RA' refers when used further in this CP.

1.3.3. Subscribers (Agency Administrators)

Refer to §1.6 for the definitions of Subscriber and Subject specific to this CP.

Swedish government agencies are the SSIA HWPKI's Subscribers and the entities within each agency to which certificates are issued are its Subjects.

Each agency requiring the issuance of HW Certificates shall appoint an Agency Administrator, who shall be responsible for the oversight of certificate issuance within their own agencies, in accordance with an Inter-Agency Agreement [IAA], and for the appointment of Agency Server Administrators (see §1.3.2). Agency Administrators shall be authorized according to the procedure defined in [IAA].

Any stipulations in this CP affecting Subscribers shall also apply to Subjects unless the context or a specific statement makes it clear that it is applicable only to the Subscriber.

1.3.3.1. Subjects

Entities within each agency to which Certificates are issued are the Subjects of those certificates. Subjects shall be required to acknowledge the terms of [IAA].

Note - In some PKIs no distinction is made between the terms Subscriber and Subject, which may be used synonymously and interchangeably.

1.3.4. Relying Parties

Agencies participating within the SSIA-HWPKI and the customers of those agencies (e.g. any party having permissible access to agency resources employing certificates issued according to this CP) shall be the Relying Parties recognized by the PKI and shall use certificates according to the stipulations of [IAA].

Relying Parties shall be any persons or entities gaining access to Swedish government agency websites which have been issued with a Certificate under the terms of this CP, by the SSIA HWCA.

1.3.5. Other Participants

1.3.5.1. Auditors

The SSIA PKI will require the services of other security authorities, such as compliance auditors. Any CPS citing an OID assigned to this document shall identify the parties responsible for providing such services, and the mechanisms used to support them.

1.4. Certificate Usage

1.4.1. Appropriate Certificate Uses

Certificates issued under this CP may be used for the purposes designated in the key usage and extended key usage fields found in the certificate. However, the sensitivity of the information processed or protected by a certificate varies greatly, and each Relying Party must evaluate the application environment and associated risks before deciding on whether to use a certificate issued under this CP.

This CP covers different types of end entity certificates/tokens with varying levels of assurance. The following table provides a brief description of the appropriate uses of each.

Certificate/Token	Appropriate Use
HW Certificates	Identify the Swedish Government Agency that controls a Web site: Provide a reasonable assurance to the user of an Internet browser that the Web site the user is accessing is controlled by the Agency identified in the Certificate, identified by its existence in the [IAA].
Encryption Certificates	Enable encrypted communications with a Swedish Government Agency Web site: Facilitate the exchange of encryption keys in order to enable the encrypted communication of information over the Internet between the user of an Internet browser and a Web site provided by the Agency identified in the Certificate, identified by its existence in the [IAA].

1.4.2. Prohibited Certificate Uses

Certificates do not attest to the good behaviour of the certificate Subjects and Subscribers. They shall not be taken to guarantee that the Subject is trustworthy, honest, reputable in its business dealings, compliant with any laws, or safe to do business with. Code signing certificates do not indicate that the signed code is safe to install or free from malware, bugs, or other forms of threats and vulnerabilities.

Certificates issued under this CP may not be used by any Subscribers in relation to any of the following:

- a) any application having a direct relationship with any safety- or environmental-critical systems;
- b) where prohibited by any laws, be they national, European or international.

1.5. Policy Administration

1.5.1. Organization Administering the Document

The ‘Responsible authority’ cited on the cover page shall be responsible for the administration of this CP.

1.5.2. Contact Person

The ‘PMA Point-of-contact’ cited on the cover page, shall be the initial point of contact for all matters.

1.5.3. Person determining CPS suitability for the policy

The Chairman of the ‘Responsible authority’ cited on the cover page shall determine the suitability of the [SSIA HWCPS] after taking into consideration the advice of the SSIA PWG (see §1.3.1.2).

1.5.4. CP Approval Procedures

The PMA board [see MCA PMA Charter] approves the CP and any amendments. Amendments are made by either updating the entire CP or by publishing an addendum. The PMA board determines whether an amendment to this CP requires notice or an OID change. See also Section 9.10 and Section 9.12 below.

1.6. Definitions and Acronyms

Unless alternative definitions, meanings or interpretations are assigned in the following parts of this sub-clause, the definitions in [CABF] and [RFC3647] apply. Should there be any conflict between terms defined in both these documents, [CABF] shall take precedence.

Administrator: Either an Agency Administrator (see §1.3.3) or an Agency System Administrator (see §1.3.2), where either rôle may perform the required action.

Public: the community of participating Agencies within the Swedish government.

Relying Party: used subject to the limitations defined in §1.3.4 but otherwise with the meaning ascribed to it in [RFC3647].

SSIA HWCA: The Swedish Social Insurance Authority Hardware Certificate Authority. Usage of this acronym will, depending upon context, refer to the actual CA systems itself or the management of the SSIA HWCA, i.e. the SSIA OA (defined in §1.3.1.3).

Subject: entity identified in a certificate as the holder of the private key associated with the public key given in the certificate [TS102042].

Subscriber: entity subscribing with a Certification Authority on behalf of one or more Subjects [TS102042].

2. PUBLICATION AND REPOSITORY RESPONSIBILITIES

2.1. Repositories

The following responsibilities for establishing repositories of, and publishing, information related to the SSIA HWPKI shall be fulfilled:

Responsible Entity	Information required to be published	Notification of change
SSIA PMA	This CP	Within five business days of approval of any revision
	[IAA]	
SSIA OA	[SSIA HWCPS]	
	Subscriber Certificates	Within 24 hours of issuance
	Certificate Revocation information	Within 18 hours of any change

2.2. Publication of Certification Information

Each Responsible Entity shall ensure that information for which it has a publishing responsibility shall be available through a publically accessible, on-line, repository.

2.3. Information Availability

Each Responsible Entity shall ensure that information for which it has a publishing responsibility shall be available 24 hours a day, 7 days a week with a minimum of 99% availability overall per annum, with a scheduled down-time that does not exceed 0.5% per annum.

2.4. Repository Access Controls

Information published in a repository is [Community] Public information. The Responsible Entity shall provide unrestricted read access to its repositories and shall implement logical and physical controls to prevent unauthorized modification to such repositories.

3. IDENTIFICATION AND AUTHENTICATION

3.1. Naming

3.1.1. Names Types

SSIA HWCA shall issue certificates with a non-null subject Distinguished Name (DN) that complies with ITU X.500 standards. DNs must respect name space uniqueness.

3.1.2. Need for Names to be meaningful

Distinguished Names in certificates shall identify the Subject by giving an accurate description of the Agency (which shall be that used in [StatsRegister] per §3.1.5, which shall be considered a Qualified Government Information Source (QGIS, per [CABF])) and Agency Entity to which they relate.

The Distinguished Name for the issuer 'SSIA HWCA' shall be:

C = SE

O = SSIA

OU = «null»

CN = "Swedish Government HW CA v4"

Directory information trees shall accurately reflect organizational structures.

3.1.3. Anonymity or Pseudonymity of Subscribers

Neither Subscribers nor Subjects may use anonymous or pseudonymous names.

3.1.4. Name Forming Rules

Distinguished Names in Certificates shall be formed and interpreted using X.500 standards and ASN.1 syntax.

3.1.5. Name Uniqueness

Name uniqueness in certificates shall be ensured by assigning each participating Agency the name given it in the register maintained by Statistiska centralbyrån (Statistics Sweden) [StatsRegister], available at <http://www.myndighetsregistret.scb.se/Myndighet.aspx>. Where the Subject is an outsourced service provider an additional OU field shall be injected (see below).

Individual Agencies shall be responsible for assigning names to Agency Entities. In the event of any potential name clashes at the Agency Entity level, RAs shall be responsible for resolving these and submitting a unique DN within Certificate Requests. Certificate DNs shall thus have the form:

C = SE

O = Agency name from [StatsRegister]

OU = Agency number from [StatsRegister]

CN = Agency Entity name

3.1.6. Recognition, Authentication, and Rôle of Trademarks

RAs may neither accept nor generate requests for certificates with any content that infringes the intellectual property rights of another entity. Explicitly, no certificate request may use any trademark, nor the identifying marks of any agency other than the Subscriber Agency issuing the request.

3.2. Initial Identity Validation

The SSIA HWCA shall only recognize agencies according to [StatsRegister].

3.2.1. Method to Prove Possession of Private Key

Key-pairs may be generated by the SSIA HWCA or be presented by the Applicant. The SSIA HWCA shall verify that the Applicant possesses the Private Key corresponding to the Public Key.

3.2.2. Authentication of Organization Identity

In the context of this CP, 'Organizations' shall be Swedish government Agencies – all Agencies defined in [StatsRegister] shall be eligible applicants, as Subscribers. On initial application the Agency representative shall sign and submit on behalf of their Agency their acceptance of [IAA] (*the signatory serves as the [CABF] Authorized Representative; the agreement fulfilling [CABF]'s requirements for Terms of Use*).

The SSIA HWCA shall verify by reference to [StatsRegister] that the Agency exists, that the application is being submitted in the correct name of the Agency and that the application is authorized by a designated recognized representative of the Agency.

The authority of a person to request a certificate on behalf of an Agency shall be verified in accordance with Section 3.2.5.

At the time of submitting their application Administrators shall reference and acknowledge the applicability of [IAA] and date their request.

These checks shall fulfil the requirements of [CABF] §4.2.1 (2) in accordance with [CABF] §4.2.2 (2).

3.2.3. Authentication of Individual Identity

For any certificate type request, the RA or appointed Agency Server Administrator shall verify an entity's identity in accordance with the process established in [SSIA HWCPS]. This shall include verification through the registrar for that domain of the Applicant Agency's right to use any domain name(s) listed in the request. Additional information required for issuance of Certificates shall be verified in accordance with Guidelines. End-entities may be non-governmental entities to which an Agency has outsourced certain services which need to be the Subjects of an Agency SSL Certificate. They shall be identified per §3.1.5.

3.2.4. Non-verified Subscriber information

No stipulation.

3.2.5. Validation of Authority

The SSIA HWCA shall validate the authority of an entity requesting any type of certificate by verifying that they are either the requesting Agency's Administrator or one of the requesting Agency's appointed Agency Server Administrators, by reference to a register of established Inter-Agency Agreements [IAARegister] maintained by the SSIA IT Production Manager]. Authentication shall rely upon User certificates issued by "Swedish Government User CA v1" which shall map to the Agency name and Agency number from [StatsRegister].

A Certificate Request may only be made for a Subject in the same Agency's domain as the requesting RA.

3.2.6. Criteria for inter-operation

No stipulation.

3.3. Identification and Authentication for Re-Key Requests

Re-keying shall not be supported.

3.4. Identification and Authentication for Revocation Request

All Revocation Requests shall be authenticated by the SSIA HWCA or the Administrator that approved certificate issuance. Any Revocation Request may be authenticated by reference to the Certificate's Public Key, regardless of whether the associated Private Key is compromised.

4. CERTIFICATE LIFE-CYCLE OPERATIONAL REQUIREMENTS

4.1. Certificate Application

In keeping with [CABF], this CPS uses the term 'Certificate Application' rather than 'Certificate Request' per [RFC3647].

4.1.1. Who Can Submit a Certificate Request

The SSIA HWCA shall only accept Certificate Requests from a designated RA, who shall only be permitted to request certificates for their own Agency's (or if other is stipulated in the [IAA]) Subjects.

4.1.2. Enrolment Process and Responsibilities

Validation personnel of the SSIA HWCA or the RA are responsible for verifying the identity of individuals or entities in accordance with this CP prior to authorizing issuance of a certificate. Each Applicant shall submit sufficient information and documentation for the SSIA HWCA or the RA to perform the required verification of identity prior to issuing a Certificate. All communication during the Certificate Request process, including delivery of public keys to be included in Certificates, shall be authenticated and protected from modification.

4.2. Certificate Application Processing

Prior to issuing the certificate the SSIA HWCA or the RA shall verify the information in each Certificate Request and shall further ensure that the requested certificate contents are accurate.

4.2.1. Performing Identification and Authentication Functions

Validation personnel of the SSIA HWCA or the RA shall identify and verify each Applicant in accordance with Section 3.2. Applicable Certification Practice Statements and [IAA] must identify who (RA, Trusted Agent, other entity, or individual) performs the identification and authentication steps required to issue a Certificate to the Applicant in each case.

4.2.2. Approval or Rejection of Certificate Application

Certificate Requests that cannot be verified shall be rejected. The SSIA HWCA may also reject a Certificate Request on any reasonable basis. Unless there is cause for criminal investigation, procedural discipline or disclosure presents a security risk to the CA or other participants within the SSIA PKI, rejection shall be supported by a reason.

4.2.3. Time to Process Certificate Application

All parties involved in Certificate Request processing shall use reasonable efforts to ensure that Certificate Requests are processed in a timely manner. Once the SSIA HWCA receives a request from an RA it shall be processed within 24 business hours.

4.3. Certificate Issuance

4.3.1. CA Actions during Certificate Issuance

During the certificate issuance process, the SSIA HWCA shall verify that the identified and authenticated Applicant is the source of the certificate request and that the Subject individual or entity exists within the indicated Agency. Databases used to confirm Subscriber identity information shall be protected from unauthorized modification or use. CA actions during the certificate issuance process shall be performed in a secure manner.

4.3.2. Notification to Subject by the CA of Issuance of Certificate

The SSIA HWCA or Agency Administrator shall notify the Subject within two business days of a certificate's issuance and may use any reliable mechanism to deliver the certificate to the Subject.

The SSIA HWCA or other reliable mechanism shall notify the Subject that a certificate requires renewal (see §4.6) not less than thirty calendar days prior to the certificates expiry.

4.4. Certificate Acceptance

4.4.1. Conduct Constituting Certificate Acceptance

A period of five business days after the retrieval of the certificate by the Subject, or use of the certificate by the Subject, constitutes the Subject's acceptance of the certificate.

4.4.2. Publication of the Certificate by the CA

All certificates issued by the SSIA HWCA shall be published in the SSIA HWCA's repository.

4.4.3. Notification of Certificate Issuance by the CA to Other Entities

No stipulation.

4.5. Key Pair and Certificate Usage

4.5.1. Subscriber Private Key and Certificate Usage

All Subjects shall protect their Private Keys from unauthorized use or disclosure by third parties and shall use their Private Keys only as specified in the key usage extension of the corresponding Certificate.

4.5.2. Relying Party Public Key and Certificate Usage

Relying Party software shall be compliant with X.509 and applicable IETF PKIX standards. The SSIA HWCA shall specify restrictions on the use of a certificate through certificate extensions and shall specify the mechanism(s) to determine certificate validity (CRLs). Relying Parties must process and comply with this information in accordance with their obligations as Relying Parties.

4.6. Certificate Renewal

4.6.1. Circumstance for Certificate Renewal

Certificate renewal shall not be supported.

4.6.2. Who May Request Renewal

No stipulation.

4.6.3. Processing Certificate Renewal Requests

No stipulation.

4.6.4. Notification of New Certificate Issuance to Subscriber

No stipulation.

4.6.5. Conduct Constituting Acceptance of a Renewal Certificate

No stipulation.

4.6.6. Publication of the Renewal Certificate by the CA

No stipulation.

4.6.7. Notification of Certificate Issuance by the CA to Other Entities

No stipulation.

4.7. Certificate Re-Key

Certificate re-keying shall not be supported.

4.7.1. Circumstance for Certificate Re-key

No stipulation

4.7.2. Who May Request Certificate Re-key

No stipulation.

4.7.3. Processing Certificate Re-key Requests

No stipulation.

4.7.4. Notification of Certificate Re-key to Subject

No stipulation.

4.7.5. Conduct Constituting Acceptance of a Re-keyed Certificate

No stipulation.

4.7.6. Publication of the Issued Certificate by the CA

No stipulation.

4.7.7. Notification of Certificate Issuance by the CA to Other Entities

No stipulation.

4.8. Certificate Modification

4.8.1. Circumstance for Certificate Modification

Modifying a certificate means creating a new certificate for the same subject with authenticated information that differs slightly from the old certificate (e.g., changes to email address or non-essential parts of names or attributes) provided that the modification otherwise complies with this CP. The new certificate may have the same or a different subject public key. Additional examples of circumstances when certificate modification may occur include minor name changes (e.g., change CA1 to CA2) as part of key rollover procedures, organizational name change (e.g. as the result of merger, acquisition, or legally documented name change), and the replacement of the certificate where a minor error in certificate information or profile has been discovered.

After modifying a client certificate, the SSIA HWCA may revoke the old certificate but may not further re-key, renew, or modify the old certificate.

4.8.2. Who May Request Certificate Modification

The SSIA HWCA may modify certificates at the request of the Subject or at its own discretion.

4.8.3. Processing Certificate Modification Requests

After receiving a request for modification, the SSIA HWCA shall verify any information that will change in the modified certificate. The SSIA HWCA shall issue the modified certificate only after completing the verification process on all modified information. The validity period of a modified certificate shall not extend beyond the applicable time limits found in section 3.3.1 or 6.3.2.

4.8.4. Notification of Certificate Modification to Subscriber

See §4.3.2, in the context of a certificate modification.

4.8.5. Conduct Constituting Acceptance of a Modified Certificate

See §4.4.1, in the context of a certificate modification.

4.8.6. Publication of the Modified Certificate by the CA

See §4.4.2.

4.8.7. Notification of Certificate Modification by the CA to Other Entities

No stipulation.

4.9. Certificate Revocation and Suspension

4.9.1. Circumstances for Revocation

Prior to revoking a certificate, the SSIA HWCA shall verify that the revocation request was made by either the Subject or the applicable RA that made the Certificate Request, or by an entity with the legal jurisdiction and authority to request revocation. The SSIA HWCA shall revoke any certification the occurrence of any of the following circumstances:

- a) the Subscriber requests revocation of its Certificate;
- b) the Subscriber indicates that the original Certificate Request was not authorized and does not retroactively grant authorization;

- c) the SSIA HWCA obtains reasonable evidence that the Subject's Private Key (corresponding to the Public Key in the Certificate) has been compromised or is suspected of compromise, or that the Certificate has otherwise been misused;
- d) the SSIA HWCA receives notice or otherwise becomes aware that a Subscriber has violated one or more of its material obligations under [IAA];
- e) the SSIA HWCA receives notice or otherwise becomes aware that a court or arbitrator has revoked a Subscriber's right to use the Domain Name listed in the Certificate, or that the Subscriber has failed to renew its rights to the Domain Name;
- f) the SSIA HWCA receives notice or otherwise becomes aware of a material change in the information contained in the Certificate or that such information is no longer accurate or representative of the facts (which would include the situation where the role of the Subject changes within the Agency such that they no longer qualify for or need the use of the certificate);
- g) a determination, in the SSIA HWCA's sole discretion, that the Certificate was not issued in accordance with the terms and conditions of these Guidelines or the SSIA HWCA's Policies;
- h) the SSIA HWCA ceases operations for any reason and has not arranged for another CA to provide revocation support for the Certificate;
- i) the SSIA HWCA's right to issue Certificates under these Guidelines expires or is revoked or terminated, unless the SSIA HWCA makes arrangements to continue maintaining the CRL Repository;
- j) the Private Key of the SSIA HWCA's Root Certificate used for issuing that Certificate is suspected to have been compromised;
- k) the SSIA HWCA receives notice or otherwise becomes aware that a Subject has been added as a denied party or prohibited person to a blacklist, or is operating from a prohibited destination under the laws of the SSIA HWCA's jurisdiction of operation;
- l) the subject fails to retrieve the certificate within sixty (60) days of notification of its availability; or
- m) such additional events as the SSIA HWCA determines, at its sole discretion, warrant revocation.

The SSIA HWCA shall always revoke a certificate if the binding between the Subject and the Subject's public key in the certificate is no longer valid or if **any** associated Private Key is compromised.

If an Agency terminates its relationship with the SSIA HWCA, the SSIA HWCA shall revoke all certificates issued in the name of that Agency.

4.9.2. Who Can Request Revocation

The SSIA HWCA or RA shall accept revocation requests from authenticated and authorized parties, such as the certificate Subscriber and the Affiliated Organization named in a certificate. The SSIA HWCA or RA may establish procedures that allow other entities to request certificate revocation for fraud or misuse. The SSIA HWCA shall revoke a certificate if it receives sufficient evidence of compromise or loss of the Private Key. The SSIA HWCA may unilaterally revoke a certificate if it finds justifiable cause.

4.9.3. Procedure for Revocation Request

Entities submitting certificate revocation requests shall provide their own identity as well as (if not the Subject) that of the Subject and the identification of the certificate, with their reason for requesting revocation. The SSIA HWCA or RA shall authenticate and log each revocation request.

The SSIA HWCA shall revoke a certificate without challenge if the request is authenticated as originating from either the Subscriber or the Subject. If revocation originates from another source then the SSIA HWCA or RA shall investigate the reason for the revocation request and act according to their findings.

The SSIA HWCA shall provide a 24/7 response to any high-priority certificate problem reports. When required by law or other explicit policy or directive, the SSIA HWCA or the RA may notify law enforcement. The SSIA HWCA shall list revoked certificates on an appropriate CRL where they shall be published until one full publication cycle after the end of the certificate's validity.

The SSIA HWCA shall publish its revocation and problem reporting procedures.

4.9.4. Revocation Request Grace Period

The revocation request grace period is the time available to the subscriber within which the subscriber must make a revocation request after reasons for revocation have been identified.

RAs are required to report the suspected compromise of their private keys and request revocation to both the SSIA-IAM and the SSIA HWCA within one hour of discovery. The SSIA HWCA shall report its decision to revoke private keys to the SSIA-IAM within one hour of discovery. All other Subscribers are required to report suspected key compromise and request revocation promptly, but in no case later than 24 hours, after discovery.

4.9.5. Time within which CA Must Process the Revocation Request

The SSIA HWCA shall revoke a certificate within one hour of receiving an actionable request or making its own decision to revoke.

4.9.6. Revocation Checking Requirement for Relying Parties

Prior to relying on information listed in a certificate, a Relying Party shall confirm the validity of each certificate in the certificate path in accordance with IETF PKIX standards, including checks for certificate validity, issuer-to-subject name chaining, policy and key use constraints, and revocation status through CRLs responders identified in each certificate in the chain. This shall be stated in [IAA].

4.9.7. CRL Issuance Frequency

The SSIA HWCA shall publish CRLs at least every 24 hours and within 18 hours of notice of a key compromise.

4.9.8. Maximum Latency for CRLs

The SSIA HWCA shall post an irregular, interim or emergency CRL to its online repository within four hours of generation (and no later than 18 hours after notification of compromise) and shall publish all regularly scheduled CRLs prior to the `nextUpdate` field in the previously issued CRL of the same scope.

4.9.9. On-line Revocation/Status Checking Availability

The SSIA HWCA shall ensure that the certificate status information distributed by it on-line meets or exceeds the requirements for CRL issuance and latency stated in §4.9.5, §4.9.7 and §4.9.8.

4.9.10. On-line Revocation Checking Requirements

A relying party must confirm the validity of a certificate via CRL in accordance with section §4.9.6, prior to relying on the certificate. This shall be stated in [IAA].

4.9.11. Other Forms of Revocation Advertisements Available

None shall be permitted

4.9.12. Special Requirements Related to Key Compromise

The SSIA HWCA or RA shall use reasonable efforts to notify potential Relying Parties if it discovers or suspects that its Private Key has been compromised. If a certificate is revoked because of compromise or suspected compromise, the SSIA HWCA shall issue a CRL within 18 hours after it receives notice of the compromise or suspected compromise.

4.9.13. Circumstances for Suspension

Not applicable.

4.9.14. Who Can Request Suspension

Not applicable.

4.9.15. Procedure for Suspension Request

Not applicable.

4.9.16. Limits on Suspension Period

Not applicable.

4.10. Certificate Status Services

4.10.1. Operational Characteristics

SSIA HWCA shall make certificate status information available via CRL. CRLs shall be updated at least once every seven (7) days.

4.10.2. Service Availability

SSIA HWCA shall provide certificate status services 24x7 without interruption, subject to §2.3.

4.10.3. Optional Features

Revocation notices shall not be removed before the certificate's original expiration date.

4.11. End of Subscription

Subscribers or Subjects may end their subscription to certificate services either by requesting that their certificate(s) be revoked or by allowing the certificate(s) or [IAA] to expire without renewal.

4.12. Key Escrow and Recovery

SSIA HWCA Private Keys shall never be escrowed. No other key escrow services shall be offered.

4.12.1. Key Escrow and Recovery Policy Practices

No stipulation.

4.12.2. Session Key Encapsulation and Recovery Policy and Practices

No stipulation.

5. MANAGEMENT, OPERATIONAL AND PHYSICAL CONTROLS

5.1. Physical Controls

5.1.1. Site Location and Construction

The SSIA HWCA shall perform its CA operations from a secure data centre equipped with logical and physical controls that make the CA operations inaccessible to non-trusted personnel. The site location and construction, when combined with other physical security protection mechanisms such as guards, door locks, and intrusion sensors, shall provide robust protection against unauthorized access to the CA system, services, documentation and records.

5.1.2. Physical Access

Each SSIA HWCA and each RA shall protect its system components (computers, rooms, services, documentation, records, etc.) from unauthorized access and shall implement physical controls to reduce the risk of equipment being tampered with. The SSIA HWCA and all RAs shall store in secure containers all removable media and paper containing sensitive plain-text information related to CA or RA operations. The security mechanisms should be commensurate with the level of threat to the equipment and data.

The SSIA HWCA shall manually or electronically monitor its systems for unauthorized access at all times, maintain an access log that is inspected periodically, and require two-person physical access to the CA hardware and systems. An SSIA HWCA shall deactivate, remove, and securely store its CA equipment when not in use. Activation data must either be memorized or recorded and stored in a manner commensurate with the security afforded the cryptographic module and must not be stored with the cryptographic module or removable hardware associated with remote workstations used to administer the CA equipment or private keys.

If the facility housing the SSIA HWCA equipment is ever left unattended, the SSIA OA shall verify that:

- a. the CA is left in a mode of operation appropriate to its unattended state;
- b. all security containers are properly secured;
- c. physical security systems (e.g., door locks, vent covers) are functioning properly and are activated; and

- d. the area is secured against unauthorized access.

The SSIA HWCA shall assign to a person or group of persons explicitly responsibility for making security checks. If a group of persons is responsible, the SSIA HWCA shall maintain a log that identifies who performed the security check. Whenever the facility is left un-attended, the last person to depart shall initial a sign-out sheet that indicates the date and time and asserts that all necessary physical protection mechanisms are in place and activated.

5.1.3. Power and Air Conditioning

The SSIA HWCA shall maintain a back-up power supply and sufficient environmental controls to protect the CA systems such that the CA shall be able to automatically conclude pending operations and record the system state prior to a lack of power or environmental conditioning causes a shutdown.

5.1.4. Water Exposure

The SSIA HWCA shall protect its CA equipment from water exposure.

5.1.5. Fire Prevention and Protection

The SSIA HWCA shall protect its CA equipment from fire by installing mechanisms which detect fire and act to suppress it.

5.1.6. Media Storage

The SSIA HWCA and all RAs shall protect all media from accidental damage and unauthorized physical access. The SSIA HWCA and each RA shall duplicate and store its audit and archive information in a back-up location that is physically separate from its primary operations facility.

5.1.7. Waste Disposal

The SSIA HWCA and all RAs shall destroy all data (electronic and paper) in accordance with [DoD5220.22M] procedures for permanently destroying such data.

5.1.8. Off-site Back-up

The SSIA HWCA or RA shall make weekly system back-ups sufficient to enable recovery from system failure and shall store the back-ups, including at least one full back-up copy, at an offsite location that has procedural and physical controls that are commensurate with its operational location and which satisfy the levels of control implied elsewhere in this CP.

5.1.9. CMS and External RA Systems

All physical control requirements under this Section 5.1 apply equally to any CMS or external RA system.

5.2. Procedural Controls

5.2.1. Trusted Rôles

SSIA HWCA and RA personnel acting in Trusted Rôles include system administration personnel and personnel involved with customer (Subscriber/Subject) support and vetting. SSIA HWCA and RAs shall design, document and publish the functions and duties performed by persons in Trusted Rôles in a way that prevents one person from circumventing security measures or subverting the security and trustworthiness of the PKI. All personnel in Trusted Rôles must be free from conflicts of interest that might prejudice the impartiality of CA and RA operations. Senior management of the SSIA HWCA or the Subscribing Agency shall be responsible for appointing individuals to Trusted Rôles (See §1.3). Those in such roles shall be identified through the [IAA].

5.2.1.1. SSIA PKI Administrator

The SSIA PKI Administrator is responsible for the installation and configuration of the SSIA HWCA software, including key generation, User and CA accounts, audit parameters, key back-up, and key management. The SSIA PKI Administrator is responsible for performing and securely storing regular system back-ups of the SSIA HWCA system.

The SSIA PKI Administrator is also responsible for managing the certificate request queue and for issuing credentials to Agency Registration Agents.

5.2.1.2. System Administrator/ System Engineer (Operator)

The System Administrator, System Engineer or CA Operator is responsible for installing and configuring CA system hardware, including servers, routers, firewalls, and network configurations. The System Administrator / Engineer is also responsible for keeping systems updated with software patches and other maintenance needed to ensure system stability and recoverability.

5.2.1.3. Agency Registration Agent

The Agency Registration Agent rôle is responsible for requesting the issuance and revocation of certificates for Subjects within its Agency, including enrolment, identity verification, and compliance with required issuance and revocation steps such as managing the certificate request queue and completing certificate approval checklists as identity vetting tasks are successfully completed.

Agency Registration Agents shall not have the means to issue certificates to Subscribers.

5.2.1.4. Internal Auditor Rôle

The Internal Auditor Rôle is responsible for reviewing, maintaining, and archiving audit logs and performing or overseeing internal compliance audits to determine whether the SSIA HWCA or RAs are operating in accordance with this CP.

5.2.2. Number of Persons Required per Task

Each SSIA HWCA shall require that at least two people acting in a Trusted Rôle (one the SSIA OA and the other not an Internal Auditor) take action to activate the SSIA HWCA's Private Keys, generate a CA key pair, or back-up a CA private key. The Internal Auditor may serve to fulfil the requirement of multi-party control for physical access to the CA system, but logical access shall not be achieved using personnel that serve in the Internal Auditor rôle.

5.2.3. Identification and Authentication for each Rôle

SSIA HWCA personnel are required to present themselves for authentication by the certificate management system before they are allowed access to the systems necessary to perform their Trusted Rôles.

5.2.4. Rôles Requiring Separation of Duties

Individual personnel shall be specifically designated to the four rôles defined in Section 5.2.1 above. Individuals may only assume one of the Officer, Administrator, and Auditor rôles, but any individual may assume the Operator rôle .

Separation of duties may be enforced either by the CA equipment, or procedurally, or by both means. The CA and RA software and hardware shall identify and authenticate its users and shall ensure that no user identity can assume both an Administrator and an Officer rôle, assume both the Administrator and Auditor rôles, or assume both the Auditor and Officer rôles. No individual shall have more than one identity.

There shall be the means to audit adherence to these rules.

5.3. Personnel Controls

Note – in this section reference is made frequently to 'the SSIA HWCA and RAs' with the intention that the SSIA HWCA shall have primacy insofar as is possible, but that (whilst remaining compliant to this CP) RAs will have latitude for specific implementation where Agency rules or circumstances so require.

5.3.1. Qualifications, Experience, and Clearance Requirements

The SSIA OA is responsible and accountable for the operation of the SSIA HWPKI and compliance with this CP and the CPS. SSIA HWCA and RA personnel and management within the SSIA HWPKI shall be assigned to Trusted Rôles on the basis of loyalty, trustworthiness, and integrity. There is no citizenship requirement for SSIA HWCA or RA personnel performing Trusted Rôles.

Managerial personnel involved in time-stamping operations must possess experience with information security and risk assessment and knowledge of time-stamping technology, digital signature technology, mechanisms for calibration of time stamping clocks with UTC, and security procedures.

The SSIA HWCA and RAs shall define in their CPS the experience, qualifications, and trustworthiness required to perform their duties under this CP and ensure that all individuals assigned to Trusted Rôles exhibit these attributes.

5.3.2. Background Check Procedures

Each person fulfilling a Trusted Rôle must undergo checks and identification prior to acting in the rôle, including verification of the individual's identity, employment history, education, character references, social security number, previous residences, driving records and criminal background. Background investigations must be performed by a competent independent authority that has the authority to perform background investigations. The SSIA HWCA and RAs shall require each individual to appear in-person before a Trusted Agent whose responsibility it is to verify identity. The Trusted Agent must verify the identity of the individual using at least one form of government-issued photo identification. All checks are for the prior five years. The highest education degree obtained must be verified regardless of the date awarded.

These checks need not be repeated if the person concerned is already employed by the Swedish government and has been previously subjected to these checks, but in the case that they have not been subjected to these checks they shall be performed within a period of three (3) months of the publication of this CP and thereafter prior to appointment for new personnel.

5.3.3. Training Requirements

The SSIA HWCA shall provide skills training to all personnel involved in the SSIA HWCA's PKI operations. The training relates to the person's job functions and covers:

- a) basic Public Key Infrastructure (PKI) knowledge;
- b) software versions used by the SSIA HWCA;
- c) authentication and verification policies and procedures;
- d) disaster recovery and business continuity procedures;
- e) common threats to the validation process, including phishing and other social engineering tactics, and [CABF].

The SSIA HWCA shall maintain records of who received training and what level of training was completed. Validation specialists must have the minimum skills necessary to satisfactorily perform validation duties before they are granted validation privileges.

The SSIA HWCA and RAs involved with the operation of CMS shall ensure that all personnel who perform duties involving the CMS receive comprehensive training. The SSIA HWCA and RAs shall create a training (awareness) covering all aspects of SMS operations and certificate issuance, and shall document the execution of the plan, including recording the names and qualifications achieved of personnel trained under this plan.

5.3.4. Retraining Frequency and Requirements

Personnel must maintain skill levels that are consistent with industry-relevant training and performance programs in order to continue acting in Trusted Rôles. The SSIA HWCA and RAs shall make individuals acting in Trusted Rôles aware of any changes to the SSIA HWCA's and RAs' operations. If such operations change, the SSIA HWCA and RAs shall provide documented training, in accordance with an executed training plan, to all Trusted Rôles.

5.3.5. Job Rotation Frequency and Sequence

No stipulation.

CPS:

5.3.6. Sanctions for Unauthorized Actions

The FKIMA and RAs shall ensure appropriate administrative and disciplinary actions are taken against personnel who violate this policy.

5.3.7. Independent Contractor Requirements

Any SSIA HWCA or RAs allowing independent contractors to be assigned to perform Trusted Rôles shall require that they agree to the obligations under this clause and the sanctions implied above in §5.3.6.

5.3.8. Documentation Supplied to Personnel

The SSIA HWCA and all RAs shall provide personnel in Trusted Rôles with the documentation necessary to perform their duties.

5.4. Audit Logging Procedures

5.4.1. Types of Events Recorded

SSIA HWCA and RAs systems (including any CMS) shall require identification and authentication at system logon. Important system actions shall be logged to establish the accountability of the operators who initiate such actions.

The SSIA HWCA and all RAs shall enable all essential event auditing capabilities of its CA or RA applications in order to record all events related to the security of the CA or RA (listed below). A message from any source received by the SSIA HWCA requesting an action related to the operational state of the CA is an auditable event. If the SSIA HWCA's applications cannot automatically record an event, the SSIA HWCA shall implement manual procedures to satisfy the requirements. For each event, the SSIA HWCA shall record the relevant:

- a) date and time;
- b) type of event;
- c) success or failure; and
- d) user or system that caused the event or initiated the action.

All event records shall be made available to auditors as proof of the SSIA HWCA's and/or RAs' practices.

Auditable Event
SECURITY AUDIT
Any changes to the audit parameters, e.g., audit frequency, type of event audited
Any attempt to delete or modify the audit logs
AUTHENTICATION TO SYSTEMS
Successful and unsuccessful attempts to assume a rôle
The value of maximum number of authentication attempts is changed
Maximum number of authentication attempts occur during user login
An administrator unlocks an account that has been locked as a result of unsuccessful authentication attempts
An administrator changes the type of authenticator, e.g., from a password to a biometric
LOCAL DATA ENTRY
All security-relevant data that is entered in the system
REMOTE DATA ENTRY
All security-relevant messages that are received by the system
DATA EXPORT AND OUTPUT
All successful and unsuccessful requests for confidential and security-relevant information
KEY GENERATION
Whenever a CA generates a key (not mandatory for single session or one-time use symmetric keys)
PRIVATE KEY LOAD AND STORAGE
The loading of Component Private Keys
All access to certificate subject Private Keys retained within the CA for key recovery purposes

Auditable Event
TRUSTED PUBLIC KEY ENTRY, DELETION AND STORAGE
SECRET KEY STORAGE
The manual entry of secret keys used for authentication
PRIVATE AND SECRET KEY EXPORT
The export of private and secret keys (keys used for a single session or message are excluded)
CERTIFICATE REGISTRATION
All certificate requests, including issuance, re-key, renewal, and revocation
Certificate issuance
Verification activities
CERTIFICATE REVOCATION
All certificate revocation requests
CERTIFICATE STATUS CHANGE APPROVAL OR REJECTION
CA CONFIGURATION
Any security-relevant changes to the configuration of a CA system component
ACCOUNT ADMINISTRATION
Rôles and users are added or deleted
The access control privileges of a user account or a rôle are modified
CERTIFICATE PROFILE MANAGEMENT
All changes to the certificate profile
REVOCATION PROFILE MANAGEMENT
All changes to the revocation profile
CERTIFICATE REVOCATION LIST PROFILE MANAGEMENT
All changes to the certificate revocation list profile
Generation of CRLs entries
TIME STAMPING
Clock synchronization
MISCELLANEOUS
Appointment of an individual to a Trusted Rôle
Designation of personnel for multiparty control
Installation of an Operating System
Installation of a PKI Application
System Start-up
Logon attempts to PKI Application
Receipt of hardware / software
Attempts to set passwords
Attempts to modify passwords
Back-up of the internal CA database
Restoration from back-up of the internal CA database

Auditable Event
File manipulation (e.g., creation, renaming, moving)
Posting of any material to a repository
Access to the internal CA database
All certificate compromise notification requests
CONFIGURATION CHANGES
Hardware
Software
Operating System
Patches
Security Profiles
PHYSICAL ACCESS / SITE SECURITY
Personnel access to secure area housing CA components
Access to a CA component
Known or suspected violations of physical security
Firewall and router activities
ANOMALIES
System crashes and hardware failures
Software error conditions
Software check integrity failures
Receipt of improper messages and misrouted messages
Network attacks (suspected or confirmed)
Equipment failure
Electrical power outages
Uninterruptible Power Supply (UPS) failure
Obvious and significant network service or access failures
Violations of a CP or CPS
Resetting Operating System clock

5.4.2. Frequency of Processing Log

The SSIA HWCA and RAs shall, at least every two months, review system logs, make system and file integrity checks, and make a vulnerability assessment. The SSIA HWCA and RAs may use automated tools to scan for anomalies or specific conditions. During their review, the SSIA HWCA and RAs shall verify that the logs have not been tampered with, examine any statistically significant set of security audit data generated since the last review, and make a reasonable search for any evidence of malicious activity.

The SSIA HWCA and RAs shall briefly inspect all log entries and more thoroughly investigate any anomalies or irregularities detected. The SSIA HWCA and RAs shall make a summary of each review available to its auditors upon request. The SSIA HWCA and RAs shall document any actions taken as a result of a review.

5.4.3. Retention Period for Audit Log

The SSIA HWCA and RA shall retain audit logs on-site until after they are reviewed. The individual who removes audit logs from the SSIA HWCA's or RA's systems must be different than the individuals who control the SSIA HWCA's signature keys.

Audit logs shall be retained for a minimum period of at least seven (7) years unless a greater retention is required by any other applicable law, standard, policy, etc.

5.4.4. Protection of Audit Log

The SSIA HWCA and RA shall implement procedures that protect archived data from destruction prior to the end of the audit log retention period. The SSIA HWCA and RA shall configure its systems and establish operational procedures to ensure that:

- a) only authorized people have read access to logs;
- b) only authorized people may archive audit logs; and
- c) audit logs are not modified.

The SSIA HWCA's and RAs' off-site storage location must be a safe and secure location that is separate from the location where the data was generated.

The SSIA HWCA and RAs shall make records available if required for the purpose of providing evidence of the correct operation of time-stamping services for the purpose of legal proceedings. Audit logs are made available to auditors upon request.

5.4.5. Audit Log Back-up Procedures

On at least a monthly basis, the SSIA HWCA and RAs shall make back-ups of audit logs and audit log summaries and store a copy of the audit log off-site.

5.4.6. Audit Collection System (internal vs. external)

The SSIA HWCA and RAs may use automatic audit processes, provided that they are invoked at system start-up and end only at system shut-down. If an automated audit system fails and the integrity of the system or confidentiality of the information protected by the system is at risk, the SSIA HWCA or RA shall consider suspending its operations until the problem is remedied.

5.4.7. Notification to Event-causing Subject

No stipulation.

5.4.8. Vulnerability Assessments

The SSIA HWCA shall perform routine risk (once a year) assessments that identify and assess reasonably foreseeable internal and external threats that could result in unauthorized access, disclosure, misuse, alteration, or destruction of any certificate data or certificate issuance process.

Based on such Risk Assessments, the CA shall develop, implement, and maintain a Security Plan consisting of security procedures and controls designed to achieve the objectives set forth above and to reasonably manage and control the risks identified during the Risk Assessment, commensurate with the sensitivity of the information held, the complexity and scope of the activities of the CA, the cost of implementing the specific measures and the harm that might result from a breach of security. The Security Plan shall include administrative, organizational, technical, and physical safeguards appropriate to the size, complexity, nature, and scope of the CA's business. The Security Plan shall be updated once a year.

The SSIA HWCA shall also routinely assess the sufficiency of the policies, procedures, information systems, technology, and other arrangements that the SSIA HWCA and RAs have in place to control such risks. The SSIA HWCA's auditors should review the security audit data checks for continuity and alert the appropriate personnel of any events, such as repeated failed actions, requests for privileged information, attempted access of system files, and unauthenticated responses.

5.5. Records Archival

The SSIA HWCA shall comply with any record retention policies that apply by law. The SSIA HWCA shall include sufficient detail in archived records to show that a certificate was issued in accordance with the CPS.

5.5.1. Types of Records Archived

The SSIA HWCA shall retain the following information in its archives (as such information pertains to the SSIA HWCA's CA operations):

- a) Any amendment of the SSIA HWCA, CP and CPS versions;
- b) Contractual obligations and other agreements concerning the operation of the CA;
- c) System and equipment configurations, modifications; and updates;
- d) Certificate and revocation requests;
- e) Identity authentication data;
- f) Any documentation related to the receipt or acceptance of a certificate or token;
- g) Subscriber Agreements;
- h) Issued certificates;
- i) A record of certificate re-keys; CRLs;
- j) Any data or applications necessary to verify an archive's contents;
- k) Compliance auditor reports;
- l) Any changes to the SSIA HWCA's audit parameters;
- m) Any attempt to delete or modify audit logs;
- n) Key generation;
- o) Access to Private Keys for key recovery purposes;
- p) Changes to trusted Public Keys;
- q) Export of Private Keys;
- r) Approval or rejection of a certificate status change request;
- s) Appointment of an individual to a Trusted Rôle;
- t) Destruction of a cryptographic module;
- u) Certificate compromise notifications;
- v) Remedial action taken as a result of violations of physical security; and
- w) Violations of the CP or CPS.

5.5.2. Retention Period for Archive

The SSIA HWCA shall retain archived data for at least seven (7) years unless a greater retention is required by any other applicable law, standard, policy, etc.

5.5.3. Protection of Archive

The SSIA HWCA shall store its archived records at a secure off-site location in a manner that prevents unauthorized modification, substitution, or destruction. No unauthorized user may access, write, or delete the archives. The SSIA HWCA shall not release archives except as requested by the SSIA PMA or as required by law. If the original media cannot retain the data for the required period, the archive site must define a mechanism to periodically transfer the archived

data to new media. The SSIA HWCA shall maintain any software application and a suitable software/hardware host system required to process the archive data until the data is either expired and then destroyed, or it is transferred to a newer medium.

5.5.4. Archive Back-up Procedures

The SSIA HWCA shall describe how its records are backed up and managed in its CPS or a document referenced therefrom.

5.5.5. Requirements for Time-stamping of Records

The SSIA HWCA shall automatically time-stamp archive records as they are created, using a time-signal per §6.8. Cryptographic time-stamping of archive records is not required.

5.5.6. Archive Collection System (internal or external)

The SSIA HWCA shall collect archive information internally.

5.5.7. Procedures to Obtain and Verify Archive Information

The SSIA HWCA may archive data manually or automatically. If automatic archival is implemented, the SSIA HWCA shall synchronize its archived data on a daily basis.

The SSIA HWCA may allow Subscribers to obtain a copy of their archived information. Otherwise, the SSIA HWCA shall restrict access to archive data to authorized personnel in accordance with the SSIA HWCA's internal security policy and shall not otherwise release any archived information except as allowed by law.

5.6. Key Changeover

The SSIA HWCA shall periodically change its Private Keys in a manner set forth in the CPS that prevents downtime in the SSIA HWCA's operation. After key changeover, the SSIA HWCA shall sign certificates using only the new key. The SSIA HWCA shall still protect its old Private Keys and shall make the old Public Key Certificate available to verify signatures until all of the certificates signed with the old Private Key have expired.

5.7. Compromise and Disaster Recovery

5.7.1. Incident and Compromise Handling Procedures

The SSIA HWCA shall implement data back-up and recovery procedures and shall develop a Disaster Recovery and/or Business Continuity Plan (DR/BCP). The SSIA HWCA shall have redundant CA systems that are located at a separate, geographically diverse location and that are configured for automatic failover in the event of a disaster (Disaster Recovery/Mirror Site). The SSIA HWCA shall review, test, and update the DR/BCP and supporting procedures annually. If a disaster occurs, the SSIA HWCA shall re-establish operational capabilities as quickly as possible.

5.7.2. Computing Resources, Software, and/or Data Are Corrupted

The SSIA HWCA shall make regular back-up copies of its Private Keys and store them in a secure off-site location. The SSIA HWCA shall also make system back-ups on a daily basis. If a disaster causes the SSIA HWCA's operations to become inoperative, the SSIA HWCA shall, after ensuring the integrity of the CA systems, re-initiate its operations on replacement hardware located at a secure facility, using back-up copies of its software, data, and Private Keys. The SSIA HWCA shall give priority to re-establishing the generation of certificate status information. If the Private Keys are destroyed, the SSIA HWCA shall re-establish operations as quickly as possible, giving priority to generating new key pairs.

5.7.3. Entity Private Key Compromise Procedures

If the SSIA HWCA suspects that a CA Private Key is comprised or lost then the SSIA HWCA shall follow its Incident Response Plan and immediately assess the situation, determine the degree and scope of the incident, and take appropriate action. SSIA HWCA personnel shall report the results of the investigation. The report must detail the cause of the compromise or loss and the measures that should be taken to prevent a re-occurrence.

If there is a compromise or loss, the SSIA HWCA shall notify any affiliated entities so that they may issue CRLs revoking cross-certificates issued to the SSIA HWCA and shall notify interested parties and make information available that can be used to identify which certificates and time-stamp tokens affected, unless doing so would breach the privacy of the Issuer CA's user or the security of the SSIA HWCA's services.

Following revocation of the SSIA HWCA's certificate and implementation of the SSIA HWCA's Incident Response Plan, the SSIA HWCA will generate a new CA Key Pair and sign a new CA certificate in accordance with its CPS. The SSIA HWCA shall distribute the new self-signed certificate in accordance with Section 6.1.4. The SSIA HWCA shall cease its CA operations until appropriate steps are taken to recover from the compromise and restore security.

5.7.4. Business Continuity Capabilities after a Disaster

The SSIA HWCA shall establish a secure facility in at least one secondary location, to ensure that its directory and on-line status servers, if any, remain operational in the event of a physical disaster at the SSIA HWCA's main site. The SSIA HWCA shall provide notice at the earliest feasible time to all interested parties if a disaster physically damages the SSIA HWCA's equipment or destroys all copies of the SSIA HWCA's signature keys.

5.8. CA or RA Termination

If the SSIA HWCA's operations are ever terminated, the SSIA HWCA shall provide notice to interested parties and shall transfer its responsibilities and records to successor entities. The SSIA HWCA may allow a successor to re-issue certificates if the successor has all relevant permissions to do so and has operations that are at least as secure as the SSIA HWCA's. If no successor CA exists, all relevant records of the SSIA HWCA shall be transferred to a government regulatory or legal body.

6. TECHNICAL SECURITY CONTROLS

6.1. Key Pair Generation and Installation

6.1.1. Key Pair Generation

All keys must be generated using a FIPS-approved method or equivalent international standard.

The SSIA HWCA shall generate cryptographic keying material on a FIPS 140-2 level 3 validated cryptographic module using multiple individuals acting in Trusted Roles. When generating keying material, the SSIA HWCA shall create auditable evidence to show that the SSIA HWCA enforced role separation and followed its key generation process. The SSIA HWCA shall have an independent third party auditor validate the execution of the key process by either witnessing the key generation or by examining the signed and documented record of the key generation.

6.1.2. Private Key Delivery to Subscriber

If the SSIA HWCA, a CMS, or an RA generates keys on behalf of the Subscriber, then the entity generating the key shall deliver the Private Key securely to the Subscriber. The entity may deliver Private Keys to Subscribers electronically or on a hardware cryptographic module / SSCD. In all cases:

- a) The key generator may not retain a copy of the Subscriber's Private Key after delivery;
- b) The key generator shall protect the private key from activation, compromise, or modification during the delivery process;
- c) The Subscriber shall acknowledge receipt of the private key(s); and
- d) The key generator shall deliver the Private Key in a way that ensures that the correct tokens and activation data are provided to the correct Subscribers, including:
- e) For hardware modules, the key generator maintaining accountability for the location and state of the module until the Subscriber accepts possession of it; and,
- f) For electronic delivery of private keys, the key generator encrypting key material using a cryptographic algorithm and key size at least as strong as the private key. The key generator shall deliver activation data using a separate secure channel.

The entity assisting with Subscriber key generation shall maintain a record of the Subscriber's acknowledgement of receipt of the device containing the Subscriber's Key Pair. A CMS or RA providing key delivery services shall provide a copy of this record to the SSIA HWCA.

6.1.3. Private Key Delivery to Certificate Issuer

Subscribers shall deliver their Public Keys to the SSIA HWCA in a secure fashion and in a manner that binds the Subscriber's verified identity to the Public Key. The certificate request process shall ensure that the Applicant possesses the Private Key associated with the Public Key presented for certification. If cryptography is used to achieve the binding, the cryptography must be at least as strong as the CA keys used to sign the Certificate.

6.1.4. CA Public Key Delivery to Relying Parties

The SSIA HWCA shall provide its public keys to Relying Parties in a secure fashion and in a manner that precludes substitution attacks. The SSIA HWCA may deliver its CA Public Keys to Relying Parties as:

- a) specified in a certificate validation or path discovery policy file;
- b) trust anchors in commercial browsers and operating system root store; and/or
- c) roots signed by other CAs

The SSIA HWCA may distribute Public Keys that are part of an updated signature key pair as a self-signed certificate, as a new CA certificate, or in a key roll-over certificate.

6.1.5. Key Sizes

The SSIA HWCA shall follow the NIST timelines in using and retiring signature algorithms and key sizes. The SSIA HWCA shall generate and use the following keys, signature algorithms, and hash algorithms for signing certificates, CRLs, and certificate status server responses:

- a) 2048-bit RSA Key with Secure Hash Algorithm version 2 (SHA-256);
- b) 2048-bit RSA Key with Secure Hash Algorithm version 2 (SHA-512).

The SSIA HWCA may issue Subject certificates that contain the following:

- c) For certificates that expire on or after 2013-12-31 and that include a `keyUsage` extension that only asserts the `digitalSignature` bit, at least 2048 bits for RSA or DSA, or 224 bits for elliptic curve algorithms;
- d) For certificates expiring after 2010-12-31, at least 2048 bits for RSA, DSA, or Diffie-Hellman, or 224 bits for elliptic curve algorithms.

The SSIA HWCA may require higher bit keys in its sole discretion.

Any certificates (whether CA or Subject) expiring after 2030-12-31 must be at least 3072 bit for RSA and 256 bit for ECDSA. Signatures on certificates and CRLs that are issued after 2010-12-31 shall be generated using, at a minimum, SHA-224. Signatures on certificates and CRLs that are issued after 2030-12-31 shall be generated using, at a minimum, SHA-256.

The SSIA HWCA and Subscribers may fulfil their requirements under the CP and CPS using TLS or another protocol that provides similar security, provided the protocol requires at least:

- a) AES (128 bits) or equivalent for the symmetric key and at least 2048 bit RSA or equivalent for the asymmetric keys after 2010-12-31; and
- b) AES (128 bits) or equivalent for the symmetric key, and at least 3072 bit RSA or equivalent for the asymmetric keys after 2030-12-31.

6.1.6. Public Key Parameters Generation and Quality Checking

The SSIA HWCA shall generate Public Key parameters for signature algorithms and perform parameter quality checking in accordance with FIPS 140-2 level 3.

6.1.7. Key Usage Purposes (as per X.509 v3 key usage field)

The SSIA HWCA shall include key usage extension fields that specify the intended use of the certificate and technically limit the certificate's functionality in X.509v3 compliant software. The SSIA HWCA shall set key usage bits or assert extended key usage OIDs for each certificate type in accordance with the SSIA Certificate Profiles document.

The SSIA HWCA shall not issue Level 3 and Level 4 certificates that are certified for both signing and encryption. Level 1 and Level 2 certificates may include a single key for use with encryption and signature in support of legacy applications. Such dual-use certificates must:

- a) be generated and managed in accordance with their respective signature certificate requirements, except where otherwise noted in this CP,
- b) never assert the non-repudiation key usage bit, and
- c) not be used for authenticating data that will be verified on the basis of the dual-use certificate at a future time.

6.2. Private Key Protection and Cryptographic Module Engineering Control

6.2.1. Cryptographic Module Standards and Controls

The SSIA HWCA shall use cryptographic modules validated to FIPS 140-2 level 3 (Hardware or Software) or equivalent. Subjects which generate their own keys shall use cryptographic modules validated to FIPS 140-2 level 3 (Hardware or Software) or equivalent.

6.2.2. Private Key ('n' from 'm') Multi-person Control

The SSIA HWCA shall ensure that multiple trusted personnel are required to act in order to access and use the SSIA HWCA's Private Keys, including any Private Key back-ups.

6.2.3. Private Key Escrow

The SSIA HWCA shall not escrow its signature keys. Subscribers may not escrow their private signature keys or dual-use keys. The SSIA HWCA may escrow Subscriber Private Keys used for encryption.

6.2.4. Private Key Back-up

The SSIA HWCA shall back-up its CA, CRL, and certificate status Private Keys under multi-person control and shall store at least one back-up off site. The SSIA HWCA shall protect all copies of its CA, CRL, and certificate status Private Keys in the same manner as the originals.

The SSIA HWCA may back-up (1) Level 1, Level 2, and Level 3 subscriber private signature keys, provided that the back-up copies are held under the Subscriber's control, and (2) Subscriber key management keys. Backed-up keys are never stored in plain text form outside of the cryptographic module. Storage that contains back-up keys shall provide security controls that are consistent with the protection provided by the Subscriber's cryptographic module.

6.2.5. Private Key Archival

The SSIA HWCA shall not archive Private Keys.

6.2.6. Private Key Transfer into or from a Cryptographic Module

All keys must be generated by and in a cryptographic module. The SSIA HWCA and RA shall never allow their Private Keys to exist in plain text outside of the cryptographic module. The SSIA HWCA shall only export its Private Keys from the cryptographic module to perform CA key back-up procedures. When transported between cryptographic modules, the SSIA HWCA shall encrypt the private key and protect the keys used for encryption from disclosure.

6.2.7. Private Key Storage on Cryptographic Module

The SSIA HWCA shall store its CA Private Keys on a cryptographic module which has been evaluated to at least FIPS 140-2 level 3 and EAL 4+.

6.2.8. Method of Activating Private Key

The SSIA HWCA shall activate its Private Keys in accordance with the specifications of the cryptographic module manufacturer. Subscribers are solely responsible for protecting their Private Keys. At a minimum, Subscribers must authenticate themselves to the cryptographic module before activating their private keys. Entry of activation data shall be protected from disclosure.

6.2.9. Method of Deactivating Private Key

The SSIA HWCA shall deactivate its Private Keys and store its cryptographic modules in secure containers when not in use. The SSIA HWCA shall prevent unauthorized access to any activated cryptographic modules.

6.2.10. Method of Destroying Private Key

The SSIA HWCA shall use individuals in Trusted Rôles to destroy CA, RA, and Status Server Private Keys when they are no longer needed. Subscribers shall destroy their Private Keys when the corresponding certificate is revoked or expired or if the Private Key is no longer needed

For software cryptographic modules, the SSIA HWCA may destroy the Private Keys by overwriting the data.

For hardware cryptographic modules, the SSIA HWCA may destroy the Private Keys by executing a “zeroize” command. Physical destruction of hardware is not required.

6.2.11. Cryptographic Module Rating

See §6.2.1.

6.3. Other Aspects of Key Pair Management

6.3.1. Public Key Archival

The SSIA HWCA shall archive a copy of each Public Key.

6.3.2. Certificate Operational Validity Periods and Key Pair Usage Validity Periods

The SSIA HWCA certificates, including renewed certificates, have maximum validity periods of:

Type	Private Key Use	Certificate Term
Root CA	20 years	25 years
Sub CA	12 years	15 years
SSL	No stipulation	39 months

Relying Parties may still validate signatures generated with these keys after expiration of the certificate.

The SSIA HWCA may retire its CA Private Keys before the periods listed above to accommodate key changeover processes. The SSIA HWCA shall not issue a Subscriber certificate with an expiration date that is past the signing root’s expiration date or that exceeds the routine re-key identification requirements specified in §3.1.1.

6.4. Activation Data

6.4.1. Activation Data Generation and Installation

The SSIA HWCA shall generate activation data that has sufficient strength to protect its Private Keys. If the SSIA HWCA uses passwords as activation data for a signing key, the SSIA HWCA shall change the activation data upon rekey of the CA certificate. The SSIA HWCA may only transmit activation data via an appropriately protected channel and at a time and place that is distinct the associated cryptographic module.

6.4.2. Activation Data Protection

The SSIA HWCA shall protect data used to unlock private keys from disclosure using a combination of cryptographic and physical access control mechanisms. Activation data shall be:

- a) memorized;
- b) biometric in nature; or
- c) recorded and secured at the level of assurance associated with the activation of the cryptographic module, and shall not be stored with the cryptographic module.

The SSIA HWCA shall require personnel to memorize and not write down their password or share their passwords with other individuals. The SSIA HWCA shall implement processes to temporarily lock access to secure CA processes if a specified number of failed log-in attempts occur.

6.4.3. Other Aspects of Activation Data

No stipulation.

6.5. Computer Security Controls

6.5.1. Specific Computer Security Technical Requirements

The SSIA HWCA shall configure its systems, including any remote workstations, to:

- a) authenticate the identity of users before permitting access to the system or applications;
- b) manage privileges of users to limit users to their assigned roles;
- c) generate and archive audit records for all transactions;
- d) enforce domain integrity boundaries for security critical processes; and
- e) support recovery from key or system failure.

The SSIA HWCA shall authenticate and protect all communications between a Trusted Rôle and its CA system. All Certificate Status Servers must:

- f) authenticate the identity of users before permitting access to the system or applications;
- g) manage privileges to limit users to their assigned roles;
- h) enforce domain integrity boundaries for security critical processes; and
- i) support recovery from key or system failure.

A CMS must be able to execute the following computer security functions:

- j) authenticate the identity of users before permitting access to the system or applications,
- k) manage privileges of users to limit users to their assigned rôles,
- l) generate and archive audit records for all transactions, (see Section 5.4)
- m) enforce domain integrity boundaries for security critical processes, and
- n) support recovery from key or system failure.

6.5.2. Computer Security Rating

No stipulation.

6.6. Life Cycle Technical Controls

6.6.1. System Development Controls

In operating its CA, the SSIA HWCA shall use only:

- a) Commercial off-the-shelf software that was designed and developed under a formal and documented development methodology,
- b) Hardware and software developed specifically for the SSIA HWCA by verified personnel, using structured development approach and a controlled development environment,
- c) Open source software that meets security requirements through software verification & validation and structured development/life-cycle management,
- d) Hardware and software purchased and shipped in a fashion that reduces the likelihood of tampering, and
- e) For CA operations, hardware and software that is dedicated only to performing the CA functions.

The SSIA HWCA shall take proper care to prevent malicious software from being loaded onto the CA equipment. Hardware and software must be scanned for malicious code on first use and periodically thereafter. The SSIA HWCA shall purchase or develop updates in the same manner as original equipment, and shall use trusted trained personnel to

install the software and equipment. The SSIA HWCA shall not install any software on its CA systems that are not part of the CA’s operations.

The SSIA HWCA shall use a formal configuration management methodology for installation and on-going maintenance of any CMS. Any modifications and upgrades to a CMS shall be documented and controlled. The SSIA HWCA shall implement a mechanism for detecting unauthorized modification to a CMS.

6.6.2. Security Management Controls

The SSIA HWCA shall establish formal mechanisms to document, control, monitor, and maintain the installation and configuration of its CA systems, including any modifications or upgrades. The Issuer CA’s change control processes shall include procedures to detect unauthorized modification to the SSIA HWCA’s systems and data entries that are processed, logged and tracked for any security-related changes to CA systems, firewalls, routers, software and other access controls. When loading software onto a CA system, the SSIA HWCA shall verify that the software is the correct version and is supplied by the vendor free of any modifications. The SSIA HWCA shall verify the integrity of software used with its CA processes at least once a week.

6.6.3. Life Cycle Security Controls

No stipulation.

6.7. Network Security Controls

The SSIA HWCA shall document and control the configurations of its systems, including any upgrades or modifications made. The SSIA HWCA shall implement a process for detecting unauthorized modifications to its hardware or software and for installing and maintaining its systems. The Issuer CA shall verify all software, when first loaded, as the unmodified software.

The SSIA HWCA and its RAs shall implement appropriate network security controls, including turning off any unused network ports and services and only using network software that is necessary for the proper functioning of the CA systems. The SSIA HWCA shall implement the same network security controls to protect a CMS as used to protect its other CA equipment.

6.8. Time-stamping

SSIA HWCA shall ensure that the accuracy of clocks used for time-stamping are within three minutes. Electronic or manual procedures may be used to maintain system time. Clock adjustments are auditable events.

7. CERTIFICATE AND CRL PROFILES

7.1. Certificate Profile

7.1.1. Version Number

The SSIA HWCA shall issue X.509 version 3 certificates.

7.1.2. Certificate Extensions

The SSIA HWCA shall use certificate extensions in accordance with applicable industry standards, including RFC 3280/5280. The SSIA HWCA shall not issue certificates with a critical private extension.

7.1.3. Algorithm Object Identifiers

The SSIA HWCA shall sign certificates using one of the following algorithms:

ecdsa-with-SHA1	{ iso(1) member-body(2) us(840) ansi-x962(10045) signatures(4) ecdsa-with-SHA1(1) }
ecdsa-with-SHA256	{ iso(1) member-body(2) us(840) ansi-X9-62 (10045) signatures(4) ecdsa-with-SHA2 (3) 2 }

If the SSIA HWCA signs certificates using RSA with PSS padding, the SSIA HWCA may use an RSA signature with PSS padding with the following algorithms and OIDs:

id-sha256	{ joint-iso-itu-t(2) country(16) us(840) organization(1) gov(101) csor(3) nistalgorithm(4) hashalgs(2) 1 }
id-sha512	{ joint-iso-itu-t(2) country(16) us(840) organization(1) gov(101) csor(3) nistalgorithm(4) hashalgs(2) 3 }

The SSIA HWCA and Subscribers may generate Key Pairs using the following:

id-dsa	{ iso(1) member-body(2) us(840) x9-57(10040) x9cm(4) 1 }
RsaEncryption	{ iso(1) member-body(2) us(840) rsadsi(113549) pkcs(1) pkcs-1(1) 1 }
Dhpublicnumber	{ iso(1) member-body(2) us(840) ansi-x942(10046) number-type(2) 1 }
id-ecPublicKey	{ iso(1) member-body(2) us(840) ansi-X9-62(10045) id-publicKeyType(2) 1 }
id-keyExchangeAlgorithm	{ joint-iso-ccitt(2) country(16) us(840) organization(1) gov(101) dod(2) infosec(1) algorithms(1) 22 }

7.1.4. Name Forms

The SSIA HWCA shall use distinguished names that are composed of standard attribute types, such as those identified in RFC 3280/5280. The SSIA HWCA shall include a unique serial number in each certificate.

7.1.5. Name Constraints

The SSIA HWCA may include name constraints in the `nameConstraints` field when appropriate.

7.1.6. Certificate Policy Object Identifier

An object identifier (OID) is a unique number that identifies an object or policy. The SSIA HWCA shall use the OIDs listed in §1.2 to identify its certificates and policies in the `certificatePolicies` extension.

7.1.7. Usage of Policy Constraints Extension

Not applicable.

7.1.8. Policy Qualifiers Syntax and Semantics

The SSIA HWCA may include brief statements in the Policy Qualifier field of the `certificatePolicies` extension.

7.1.9. Processing Semantics for the Critical Certificate Policies Extension

No stipulation.

7.2. CRL Profile

7.2.1. Version number(s)

The SSIA HWCA shall issue version 2 CRLs that conform to [RFC3280/5280].

7.2.2. CRL and CRL Entry Extensions

The SSIA HWCA CRL extensions shall conform to the Federal PKI X.509 CRL Extensions Profile.

7.3. OCSP PROFILE

The SSIA HWCA shall operate an OCSP service in accordance with [RFC2560].

7.3.1. Version Number(s)

The SSIA HWCA shall support version 1 OCSP requests and responses.

7.3.2. OCSP Extensions

No stipulation.

8. COMPLIANCE AUDIT AND OTHER ASSESSMENTS

The policies in this CP are designed to meet or exceed the requirements of generally accepted and developing industry standards, including [CABF] and the AICPA/CICA WebTrust Program for Certification Authorities, ANS X9.79/ISO 21188 PKI Practices and Policy Framework ("CA WebTrust/ISO 21188").

8.1. Frequency or Circumstances of Assessment

On at least an annual basis, the SSIA HWCA shall appoint an independent (third-party) auditor who shall assess its conformity with this CP and its CPS. This audit shall cover the SSIA HWCA, CMSs, RAs, and each Status Server that is specified in a certificate issued by the SSIA HWCA.

8.2. Identity/Qualifications of Auditors

The appointed auditor shall fulfil the following criteria

- a) **Qualifications and experience:** *Auditing must be the auditor's primary business function. The individual or at least one member of the audit group must be qualified as a Certified Information Systems Auditor (CISA), an AICPA Certified Information Technology Professional (CPA.CITP), a Certified Internal Auditor (CIA), or have another recognized information security auditing credential.*
- b) **Expertise:** The individual or group must be trained and skilled in the auditing of secure information systems and be familiar with Public Key infrastructures, certification systems, and Internet security issues;
- c) **Rules and standards:** *The auditor must conform to applicable standards, rules, and best practices promulgated by the American Institute of Certified Public Accountants (AICPA), the Canadian Institute of Chartered Accountants (CICA), the Institute of Chartered Accountants of England & Wales (ICAEW), the International Accounting Standards adopted by the European Commission (IAS), Information Systems Audit and Control Association (ISACA), the Institute of Internal Auditors (IIA), or another qualified auditing standards body.*
- d) **Reputation:** The firm must have a reputation for conducting its auditing business competently and correctly;
- e) **Insurance:** auditors must maintain Professional Liability/Errors and Omissions Insurance, with policy limits of at least \$1 million in coverage.

8.3. Assessor's Relationship to Assessed Entity

The SSIA HWCA shall utilize an independent (third-party) auditor that has no financial interest, business relationship, or course of dealing that could foreseeably create a significant bias for or against SSIA or the SSIA HWCA.

8.4. Topics covered by Assessment

The audit must conform to industry standards, cover the SSIA HWCA's compliance with its business practices disclosure, and evaluate the integrity of the SSIA HWCA's PKI operations, commencing from the Root Key generation and signing ceremony.

8.5. Actions taken as a result of Deficiency

If an audit reports any material non-conformity with applicable law, this CP, the CPS, or any other contractual obligations related to the SSIA HWCA's services, then

- a) the auditor shall document the non-conformity;
- b) the auditor shall promptly notify the SSIA HWCA and the SSIA PMA of the non-conformity, and;
- c) the SSIA HWCA and the SSIA PMA shall develop a plan to remedy the non-conformity.

The SSIA HWCA shall submit the remedial plan to the SSIA PMA for approval and to any third party that the SSIA HWCA is legally obligated to satisfy. The SSIA PMA may require additional action if necessary to rectify any significant issues created by the non-conformity, including requiring revocation of affected certificates.

8.6. Communication of Results

The results of each audit shall be reported to the SSIA PMA for review and approval. The results shall also be communicated to any third party entities entitled by law, regulation, or agreement to receive a copy of the audit results.

8.7. Self-Audits

The SSIA HWCA shall conduct at planned intervals internal (first-party) quality audits against a randomly-selected sample of certificates issued, encompassing a minimum of 3% of the issuances since the last internal audit.

9. OTHER BUSINESS AND LEGAL MATTERS

9.1. Fees

The SSIA HWCA shall levy Subscriber Agencies an annual charge for each Agency, depending how many employees they have.

9.2. Financial Responsibility

9.2.1. Insurance Coverage

The SSIA HWCA shall maintain sufficient insurances in respect of its performance under this CP through Kammarkollegiet (The Legal, Financial and Administrative Services Agency) in accordance with ordinance on governmental agencies' risk management (förordningen (1995:1300) om statliga myndigheters riskhantering).

9.2.2. Other Assets

No stipulation.

9.2.3. Insurance or Warranty Coverage for End-Entities

No stipulation

9.3. Confidentiality of Business Information

9.3.1. Scope of Confidential Information

Issuer CAs shall specify what constitutes confidential information in its CPS.

9.3.2. Information Not Within the Scope of Confidential Information

Issuer CAs may treat any information not listed as confidential in the CPS as public information.

9.3.3. Responsibility to Protect Confidential Information

The SSIA HWCA's employees, agents, and contractors are responsible for protecting confidential information in accordance with the Public Access to Information Act (2009:400).

9.4. Privacy of Personal Information

9.4.1. Responsibility to Protect Private Information

All personnel involved with the SSIA PKI are expected to handle personnel information in strict confidence and meet the requirements of Swedish and European law concerning the protection of personal data. The SSIA HWCA shall securely store and protect sensitive against accidental disclosure.

9.4.2. Information Treated as Private

The SSIA HWCA treats all personal information about an individual that is not publicly available in the contents of a certificate or CRL as private information.

9.4.3. Information Not Deemed Private

Certificates, CRLs, and the personal or corporate information appearing in them are not considered private information.

9.4.4. Responsibility to Protect Private Information

All personnel involved with the SSIA PKI are expected to handle personnel information in strict confidence and meet the requirements of Swedish and European law concerning the protection of personal data.

9.4.5. Notice and Consent to Use Private Information

Personal data provided during the application, registration, and identity verification process that is not contained in Certificates is considered private information. SSIA may only use private information with the subject's express written consent or as required by applicable law or regulation.

9.4.6. Disclosure Pursuant to Judicial or Administrative Process

SSIA may disclose private information, without notice, when required to do so by law or regulation.

9.4.7. Other Information Disclosure Circumstances

No stipulation.

9.5. Intellectual Property Rights

The SSIA HWCA shall not knowingly violate the intellectual property rights of any third party. The SSIA HWCA shall retain ownership over certificates but shall grant permission to reproduce and distribute certificates on a non-exclusive, royalty-free basis, provided that they are reproduced and distributed in full. Private Keys and Public Keys are the property of the Subscribers who rightfully issue and hold them.

9.6. Representations and Warranties

9.6.1. CA Representations and Warranties

The SSIA HWCA represents that it complies, in all material aspects, with this CP, the CPS, its internal and published policies and procedures, and all applicable laws and regulations. The SSIA HWCA expressly disclaims all other representations except as otherwise stated in the CPS or in any separate agreements.

9.6.2. RA Representations and Warranties

At a minimum, the SSIA HWCA shall require all Agencies (in their rôle as RAs) to represent that they have followed this CP and the CPS when participating in the issuance and management of certificates. The SSIA HWCA may include additional representations and obligations in its CPS or in its agreement with the RA.

9.6.3. Subscriber Representations and Warranties

The SSIA HWCA shall, through the [IAA], make Subscribers solely responsible for any misrepresentations they make to third parties and for all transactions that use Subscriber's Private Key, regardless of whether such use was authorized. Prior to being issued a certificate, Subscribers shall contractually agree to:

- a) Securely protect their Private Keys from compromise;
- b) Provide accurate and complete information and communication to the SSIA HWCA at all times;
- c) Confirm the accuracy of certificate data prior to using the certificate;
- d) Promptly cease using a certificate and notify the SSIA HWCA if:
 - i) any information that was submitted to the SSIA HWCA or is included in a certificate changes or becomes misleading or;
 - ii) there is any actual or suspected misuse or compromise of the Private Key associated with the certificate;
- e) Use the certificate only for authorized and legal purposes, consistent with this CPS and the [IAA], including only installing SSL certificates on servers accessible at the domain listed in the certificate;
- f) Abide by the [IAA] and the CPS when requesting or using a Certificate; and
- g) Promptly cease using the certificate and related Private Key after the certificate's expiration.

9.6.4. Relying Party Representations and Warranties

Relying Parties must follow the procedures and make the representations provided for herein and in the applicable Relying Party Agreement prior to relying on or using a certificate.

9.6.5. Representations and Warranties of Other Participants

No stipulation.

9.7. Disclaimers of Warranties

Except as expressly stated otherwise herein or as limited by law, SSIA disclaims all warranties and obligations related to this CP. A fiduciary duty is not created simply because an entity uses services offered within the SSIA PKI.

9.8. Limitations of Liability

An SSIA HWCA may limit its liability for each certificate type as set forth in its CPS. A CPS may exclude all liability for any certificate issued and managed in accordance with this CP and the CPS or in instances where a Subscriber or Relying Party has not complied with the terms and conditions of use for the Certificate.

9.9. Indemnities

9.9.1. Indemnification by an SSIA HWCA

The SSIA HWCA's indemnification obligations are set forth in [IAA].

9.9.2. Indemnification by Subscribers

The SSIA HWCA shall include its indemnification requirements for Subscribers in the CPS and in [IAA].

9.9.3. Indemnification by Relying Parties

The SSIA HWCA shall include its indemnification requirements for Relying Parties in [IAA].

9.10. Term and Termination

9.10.1. Term

This CP and any amendments are effective when published to SSIA's online repository and remain in effect until deleted or replaced with a newer version.

9.10.2. Termination

This CP and any amendments remain in effect until deleted or replaced by a newer version. Prior to termination by deletion SSIA shall publish a notification to this effect to SSIA's online repository no less than one (1) year (365 days) in advance.

9.10.3. Effect of Termination and Survival

SSIA will communicate the conditions and effect of this CP's termination via the SSIA Repository. The communication will specify which provisions survive termination. At a minimum, responsibilities related to protecting confidential information will survive termination.

9.11. Individual Notices and Communications with Participants

SSIA accepts digitally signed or paper notices related to this CP that are addressed to the locations specified in Section 2.2 of this CP. Notices are deemed effective after the sender receives a valid, digitally signed acknowledgment of receipt from SSIA. If an acknowledgment of receipt is not received within five days, the sender must resend the notice in paper form to the street address specified in Section 2.2 using either a courier service that confirms delivery or via certified or registered mail with postage prepaid and return receipt requested.

9.12. Amendments

9.12.1. Procedure for Amendment

The SSIA PMA determines what amendments should be made to this CP or the CPS. Amendments are made by posting an updated version of the CP or CPS to the online repository. Controls are in place to reasonably ensure that this CP and the CPS is not amended and published without the prior authorization of the SSIA PMA. The SSIA PMA reviews this CP and the CPS annually.

9.12.2. Notification Mechanism and Period

The SSIA HWCA will post notice on its website of any proposed significant revisions to this CP. The notice will include a final date for receipt of comments and the proposed effective date. The Issuer CA does not have a fixed notice and comment period. The SSIA HWCA may make editorial and typographical corrections, changes to contact details, and other changes that do not materially impact the parties without notice and without changing the version of this CP.

9.12.3. Circumstances under which OID Must Be Changed

If the SSIA PMA determines an amendment necessitates a change in an OID, then the revised version of this CP will also contain a revised OID. Otherwise, amendments do not require an OID change.

9.13. Dispute Resolution Provisions

Before resorting to any dispute resolution mechanism, including adjudication or any type of alternative dispute resolution, a party must notify SSIA of the dispute with a view to seek dispute resolution.

9.14. Governing Law

The laws of Sweden shall govern the interpretation, construction, and enforcement of this CP and all proceedings related hereunder, including tort claims, without regard to any conflicts of law principles.

9.15. Compliance with Applicable Law

This CP is subject to all laws and regulations within the jurisdiction within which the SSIA HWCA operates.

Subject to §9.4.5's Notice and Consent to Use Private Information contained in Certificates, each SSIA HWCA shall meet the requirements of European Data Protection Directive 95/46/EC and shall establish and maintain appropriate technical and organizational measures against unauthorized or unlawful processing of personal data and against the loss, damage, or destruction of personal data.

9.16. Miscellaneous Provisions

9.16.1. Entire Agreement

The SSIA HWCA shall, through the [IAA], contractually obligate every RA involved in Certificate issuance to comply with this CP and applicable industry Guidelines. The SSIA HWCA will also require parties using its products and services, such as Subscribers and Relying Parties, to accept agreements. No third party may rely on or bring action to enforce any such agreement.

9.16.2. Assignment

Entities operating under this CP may not assign their obligations without the prior written consent of SSIA.

9.16.3. Severability

If any provision of this CP is held invalid or unenforceable by a competent court or tribunal, the remainder of the CP will remain valid and enforceable.

9.16.4. Enforcement (attorneys' fees and waiver of rights)

SSIA may seek indemnification and attorneys' fees from any party for damages, losses, and expenses related to that party's conduct. SSIA's failure to enforce a provision of this CP does not waive SSIA's right to enforce the same provision later or right to enforce any other provision of this CP. To be effective, waivers must be in writing and signed by SSIA.

9.16.5. Force Majeure

SSIA is not liable for a delay or failure to perform an obligation under this CP to the extent that the delay or failure is caused by an occurrence beyond SSIA's reasonable control. The operation of the Internet is beyond SSIA's reasonable control.

9.17. Other Provisions

9.17.1. Inter-Agency Agreement

Eligible Agencies wishing to participate in the SSIA PKI shall signify their acceptance of the terms of an Inter-Agency Agreement [IAA], which shall, as a minimum, meet the requirements of [CABF] §9.3. This agreement shall be signed by each participating Agency's authorized representative, per [StatsRegister]. Once signed, the Agreement shall apply to all Certificate Requests which are submitted by and signed by any Administrator, acting in an RA capacity, representing that Agency (that Agency being effectively the Subscriber).

The scope of [IAA] shall be all topics in this CP where there is reference to [IAA] as being the applicable agreement on which operations shall be based and any other topics as deemed necessary according to the CPS, of which [IAA] shall be a subordinate document, notwithstanding its status as given by this CP.

Acknowledgement of [IAA] shall be required by reference from each Certificate Request, thus enforcing both the Administrators (Subscribers) and individual Subjects (Sponsors) to acknowledge the existence of [IAA] and their entitlements and obligations thereunder.

After the initial signing of [IAA] each Agency Administrator shall be required, on the anniversary of that initial signing, to reaffirm their commitment to [IAA] within twenty-eight (28) days.

No further stipulations beyond §9.17.1.