



# Central Depository Services (India) Limited

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## COMMUNIQUÉ TO REGISTRAR & TRANSFER AGENTS

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CDSL/OPS/RTA/POLCY/2022/132

July 07, 2022

### **MODIFICATION IN CYBER SECURITY AND CYBER RESILIENCE FRAMEWORK OF QUALIFIED REGISTRARS TO AN ISSUE AND SHARE TRANSFER AGENTS (“QRTAS”)**

Issuers / RTAs are advised to refer to SEBI Circular no. SEBI/HO/MIRSD/TPD/P/CIR/2022/96 dated July 06, 2022, regarding **Modification in Cyber Security and Cyber resilience framework of Qualified Registrars to an Issue and Share Transfer Agents (“QRTAs”)** [refer Annexure].

Issuers / RTAs are advised to take note of the same and ensure compliance.

Queries regarding this communiqué may be addressed to **CDSL – Helpdesk**: on telephone numbers (022) 2305-8624, 2305-8639, 2305-8642, 2305-8663, 2305-8640, 2300-2041 or 2300-2033. Emails may be sent to: [helpdesk@cdslindia.com](mailto:helpdesk@cdslindia.com).

sd/-

**Nilesh Shah**  
**Asst. Vice President - Operations**

CIRCULAR

SEBI/HO/MIRSD/TPD/P/CIR/2022/96

July 06, 2022

To

All Qualified Registrars to an Issue / Share Transfer Agents

Dear Sir/ Madam,

**Sub: - Modification in Cyber Security and Cyber resilience framework of Qualified Registrars to an Issue and Share Transfer Agents (“QRTAs”)**

1. SEBI vide circular dated 08 September 2017, 15 October 2019 and 27 May 2022 prescribed framework for Cyber Security and Cyber Resilience for all Qualified Registrars to an Issue and Share Transfer Agents (QRTAs).
2. In partial modification to **Annexure A** of SEBI circular dated 08 September 2017 the paragraph-51 shall be read as under:

*51. All Cyber-attacks, threats, cyber-incidents and breaches experienced by QRTAs shall be reported to SEBI within 6 hours of noticing / detecting such incidents or being brought to notice about such incidents.*

*The incident shall also be reported to Indian Computer Emergency Response team (CERT-In) in accordance with the guidelines / directions issued by CERT-In from time to time. Additionally, the QRTAs, whose systems have been identified as “Protected system” by National Critical Information Infrastructure Protection Centre (NCIIPC) shall also report the incident to NCIIPC.*

*The quarterly reports containing information on cyber-attacks, threats, cyber-incidents and breaches experienced by QRTAs and measures taken to mitigate vulnerabilities, threats and attacks including information on bugs/ vulnerabilities/threats that may be useful for other QRTAs shall be*

*submitted to SEBI within 15 days from the quarter ended June, September, December and March of every year. The above information shall be shared through the dedicated e-mail id: [rta@sebi.gov.in](mailto:rta@sebi.gov.in).*

3. The format for reporting as prescribed in the circular dated 15 October 2019 remains unchanged and is attached as **Annexure B**.
4. QRTAs shall take necessary steps to put in place systems for implementation of the circular.
5. The provisions of the Circular shall come into force with immediate effect.
6. The circular is issued with the approval of the competent authority.
7. This circular is being issued in exercise of powers conferred under Section 11 (1) of the Securities and Exchange Board of India Act, 1992 to protect the interests of investors in securities and to promote the development of, and to regulate the securities market.

Yours faithfully,

**Vishal M Padole**  
**Deputy General Manager**  
**MIRSD**  
**Tel. No: 022 26449247**  
**Email ID: [vishalp@sebi.gov.in](mailto:vishalp@sebi.gov.in)**

**Annexure - B**

| Incident Reporting Form                                               |                                                           |        |
|-----------------------------------------------------------------------|-----------------------------------------------------------|--------|
| 1. Letter / Report Subject -                                          |                                                           |        |
| Name of the intermediary -                                            |                                                           |        |
| SEBI Registration no. -                                               |                                                           |        |
| Type of intermediary -                                                |                                                           |        |
| 2. Reporting Periodicity                                              |                                                           |        |
| Year-                                                                 |                                                           |        |
| <input type="checkbox"/> Quarter 1 (Apr-Jun)                          | <input type="checkbox"/> Quarter 3 (Oct-Dec)              |        |
| <input type="checkbox"/> Quarter 2 (Jul-Sep)                          | <input type="checkbox"/> Quarter 4 (Jan-Mar)              |        |
| 3. Designated Officer (Reporting Officer details) -                   |                                                           |        |
| Name:                                                                 | Organization:                                             | Title: |
| Phone / Fax No:                                                       | Mobile:                                                   | Email: |
| <b>Address:</b>                                                       |                                                           |        |
| Cyber-attack / breach observed in Quarter:                            |                                                           |        |
| ( If yes, please fill <b>Annexure C</b> )                             |                                                           |        |
| ( If no, please submit the NIL report)                                |                                                           |        |
| Date & Time                                                           | Brief information on the Cyber-attack / breached observed |        |
|                                                                       |                                                           |        |
| <b>Annexure C</b>                                                     |                                                           |        |
| 1. Physical location of affected computer / network and name of ISP - |                                                           |        |
|                                                                       |                                                           |        |
| 2. Date and time incident occurred -                                  |                                                           |        |
| Date:                                                                 | Time:                                                     |        |
|                                                                       |                                                           |        |

| 3. Information of affected system -                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                     |                        |                         |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|-------------------------|
| IP Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Computer / Host Name:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Operating System (incl. Ver. / release No.):                                                                                                                                                                                                                        | Last Patched/ Updated: | Hardware Vendor/ Model: |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                     |                        |                         |
| 4. Type of incident -                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                     |                        |                         |
| <input type="checkbox"/> Phishing<br><input type="checkbox"/> Network scanning / Probing Break-in/Root Compromise<br><input type="checkbox"/> Virus/Malicious Code<br><input type="checkbox"/> Website Defacement<br><input type="checkbox"/> System Misuse                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Spam<br><input type="checkbox"/> Bot/Botnet<br><input type="checkbox"/> Email Spoofing<br><input type="checkbox"/> Denial of Service(DoS)<br><input type="checkbox"/> Distributed Denial of Service(DDoS)<br><input type="checkbox"/> User Account Compromise                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> Website Intrusion<br><input type="checkbox"/> Social Engineering<br><input type="checkbox"/> Technical Vulnerability<br><input type="checkbox"/> IP Spoofing<br><input type="checkbox"/> Ransomware<br><input type="checkbox"/> Other_____ |                        |                         |
| 5. Description of incident -                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                     |                        |                         |
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| 6. Unusual behavior/symptoms (Tick the symptoms) -                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                     |                        |                         |
| <input type="checkbox"/> System crashes<br><input type="checkbox"/> New user accounts/ Accounting discrepancies<br><input type="checkbox"/> Failed or successful social engineering attempts<br><input type="checkbox"/> Unexplained, poor system performance<br><input type="checkbox"/> Unaccounted for changes in the DNS tables, router rules, or firewall rules<br><input type="checkbox"/> Unexplained elevation or use of privileges<br><input type="checkbox"/> Operation of a program or sniffer device to capture network traffic;<br><input type="checkbox"/> An indicated last time of usage of a user account that does not correspond to the actual last time of usage for that user<br><input type="checkbox"/> A system alarm or similar indication from an intrusion detection tool<br><input type="checkbox"/> Altered home pages, which are usually the intentional target for visibility, or other pages on the Web server | <input type="checkbox"/> Anomalies<br><input type="checkbox"/> Suspicious probes<br><input type="checkbox"/> Suspicious browsing New files<br><input type="checkbox"/> Changes in file lengths or dates<br><input type="checkbox"/> Attempts to write to system<br><input type="checkbox"/> Data modification or deletion<br><input type="checkbox"/> Denial of service<br><input type="checkbox"/> Door knob rattling<br><input type="checkbox"/> Unusual time of usage<br><input type="checkbox"/> Unusual usage patterns<br><input type="checkbox"/> Unusual log file entries<br><input type="checkbox"/> Presence of new setuid or setgid files<br><input type="checkbox"/> Changes in system directories and files<br><input type="checkbox"/> Presence of cracking utilities<br><input type="checkbox"/> Activity during non-working hours or holidays<br><input type="checkbox"/> Other (Please specify) |                                                                                                                                                                                                                                                                     |                        |                         |
| 7. Details of unusual behavior/symptoms -                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                     |                        |                         |
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|                                                                                  |                |                              |             |
|----------------------------------------------------------------------------------|----------------|------------------------------|-------------|
| 8. Has this problem been experienced earlier? If yes, details -                  |                |                              |             |
|                                                                                  |                |                              |             |
| 9. Agencies notified -                                                           |                |                              |             |
| Law Enforcement                                                                  | Private Agency | Affected Product Vendor      | Other _____ |
|                                                                                  |                |                              |             |
| 10. IP Address of apparent or suspected source -                                 |                |                              |             |
| Source IP address:                                                               |                | Other information available: |             |
|                                                                                  |                |                              |             |
| 11. How many host(s) are affected -                                              |                |                              |             |
| 1 to 10                                                                          | 10 to 100      | More than 100                |             |
|                                                                                  |                |                              |             |
| 12. Details of actions taken for mitigation and any preventive measure applied - |                |                              |             |
|                                                                                  |                |                              |             |

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