



301 E. Fourth Street, Cincinnati, OH 45202

# Application For Cyber Risk Insurance Policy

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**INSURING AGREEMENT I.B. OF THIS POLICY IS WRITTEN ON A CLAIMS MADE BASIS AND APPLIES ONLY TO CLAIMS FIRST MADE AGAINST THE INSURED DURING THE POLICY PERIOD OR ANY APPLICABLE EXTENDED REPORTING PERIOD. COSTS OF DEFENSE REDUCE AND MAY EXHAUST THE APPLICABLE LIMIT(S) OF LIABILITY AVAILABLE TO PAY SETTLEMENTS, JUDGMENTS OR OTHER COSTS. LOSS, INCLUDING COSTS OF DEFENSE AND OTHER COVERED COSTS ARE SUBJECT TO THE APPLICABLE RETENTION.**

**PLEASE READ THE POLICY CAREFULLY. COMPLETION OF THIS APPLICATION IN NO WAY WILL BE CONSIDERED A BINDER OF COVERAGE.**

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## Part I – GENERAL INFORMATION

Company Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, Province, Postal Code: \_\_\_\_\_

Person responsible for buying coverage: \_\_\_\_\_ Email: \_\_\_\_\_

Year the Company was established: \_\_\_\_\_

Total revenues most recent fiscal year: \$ \_\_\_\_\_

Projected revenue for the current fiscal year: \$ \_\_\_\_\_

Total number of locations: \_\_\_\_\_

Total number of employees: \_\_\_\_\_

Description of operations: \_\_\_\_\_

SIC code(s): \_\_\_\_\_

List of Subsidiaries of the Company: \_\_\_\_\_

\_\_\_\_\_

List of Websites: \_\_\_\_\_

\_\_\_\_\_

## Part II – COVERAGE INFORMATION

### *Prior Coverage*

1. Does the Company currently purchase any form of Privacy, Cyber, or Network Liability insurance either on a stand-alone basis or by endorsement to any policy?  Yes  No

*If Yes, please skip question 3. and provide a copy of the current policy's Declarations.*

Prior Breaches/Losses

2. Have any of the following situations occurred in the past five years (internal or external origination)?

- a) Privacy, Cyber, or Network Liability insurance claims?
b) Loss or theft of data?
c) Data breach requiring the Company to notify individuals of the breach?
d) Loss of any laptop, smartphone, or other mobile device?
e) A systems intrusion, tampering, virus or malicious code attack, hacking incident?
f) Regulatory inquiry, investigation or action related to data or network security?
g) Allegations by anyone (including allegations by employees of the Company) that their personal information has been compromised?

If Yes to any of the above, please detail in a separate attachment a description of the incident including relevant dates, the number and type of records involved, the total dollar amount of expenses in connection with the incident, a summary of the Company's response to the security breach, and subsequent changes made to prevent the likelihood of future events.

NOTE: WITHOUT PREJUDICE TO ANY OTHER RIGHTS OR REMEDIES OF THE UNDERWRITER, IT IS AGREED THAT ANY CLAIM, BREACH OR LOSS REQUIRED TO BE DISCLOSED IN RESPONSE TO THIS QUESTION IS EXCLUDED FROM THE PROPOSED INSURANCE, AND THAT ANY CLAIM, LOSS OR COSTS ARISING FROM ANY FACT, CIRCUMSTANCE, SITUATION, TRANSACTION, EVENT, ACT, ERROR OR OMISSION REQUIRED TO BE DISCLOSED IN RESPONSE TO THIS QUESTION IS EXCLUDED FROM THE PROPOSED INSURANCE.

3. Is the undersigned aware of any fact, circumstance, situation, transaction, event, act, error or omission involving the Company or any of its Subsidiaries which the undersigned has reason to believe may or could reasonably be foreseen to give rise to a claim or loss that may fall within the scope of the proposed insurance?

NOTE: IT IS AGREED THAT ANY CLAIM, LOSS OR COSTS ARISING FROM ANY FACT, CIRCUMSTANCE, SITUATION, TRANSACTION, EVENT, ACT, ERROR OR OMISSION REQUIRED TO BE DISCLOSED IN RESPONSE TO QUESTION 3. IS EXCLUDED FROM COVERAGE.

Part III – DATA GATHERING & STORAGE

4. Please check which of the following types of third party client/consumer/customer/user data the Company collects, stores, manages, or processes NOT including data provided by employees as part of their employment files?

- Social Insurance/Security Numbers
Driver's License Numbers
Passport Numbers
Health Card Numbers
Personal Health Information
Background Checks
Educational Records
Intellectual Property
Financial Reports
Credit Reports
Name & Address
Email Address
Username & Passwords
Date of Birth
Mother's Maiden Name

5. With respect to the information above:

- a) How many unique individuals' records does the Company store, hold or process in a year?
b) Confidential data is protected using:
c) Does the Company utilize third parties in the collection, destruction, storage, processing, or management of any of the information above?

If Yes, please respond to the following: Does the Company conduct regular reviews of its third-party service providers and partners to ensure that they adhere to the Company's contractual and/or regulatory requirements for the protection of sensitive business/customer data that it entrusts to their care for processing, handling, and marketing purposes?

6. Does the Company accept payment cards?

- If Yes, please provide the following information:
a) Approximate number of annual payment card transactions:
b) PCI DSS merchant level
c) Does the Company store/retain payment card data (for example: recurring customer charges)?

d) Is the Company presently PCI DSS Compliant?

Yes  No

If Yes, please provide the most recent evaluation date: \_\_/\_\_/\_\_\_\_

If No, please detail the Company's noncompliance on a separate attachment including the steps being taken to rectify the situation.

7. Does the Company share any personally identifiable information with other internal or external entities?  Yes  No  
*If Yes, detail the Company's activities in this regard on a separate attachment including the data gathered, records involved, revenues derived from such activities and regulatory oversight/limitations of such activities.*

## Part IV –CONTROLS & PROCEDURES

### Network Security

8. Is network firewall technology used to prevent unauthorized access to internal networks?  Yes  No
9. Is an anti-virus solution currently implemented on company devices (including but not limited to company servers, desktop PCs, laptops, etc.)?  Yes  No
10. Are patches and updates routinely implemented to the safeguards referenced in 8. & 9. above?  Yes  No
11. Does the Company's network administrator enforce restrictions regarding installing applications to company computers and mobile devices?  Yes  No
12. Does the Company maintain and follow established procedures for both "friendly" and "adverse" employee departures that include revoking network privileges in a timely manner and an inventoried recovery of all information, assets, user accounts, and systems previously assigned to each individual during their full period of employment?  Yes  No
13. Does the Company perform routine:
- a) Network monitoring?  
 Yes  No
  - b) Penetration testing?  
 Yes  No
  - c) Third party security scans and/or assessments?  
 Yes  No

### Data Governance

14. Does the Company maintain an enterprise-wide policy covering records and information management compliance?  Yes  No
15. Does the Company conduct routine employee training regarding records management and IT security issues?  Yes  No
16. Does the Company have a disaster recovery plan?  Yes  No
17. How frequently are the Company's mission critical systems & data assets backed up?  
 hourly  daily  weekly  monthly  less frequently than monthly

## Part V – MEDIA INFORMATION

18. How many brand names and/or trademarks does the Company use?  
 0-2  2- 10  > 10
19. Does the Company have a lawyer involved in reviewing marketing and advertising?  Yes  No
20. Does the Company publish any books, journals, movies, or music as part of its business?  Yes  No
21. Please select all that apply for the Company's online presence:
- Website
  - Bulletin Board(s) or chat room(s) on the Company's website
  - Social Media (facebook, Twitter, etc.)
  - Company Blog
  - User Supplied Content (forums, reviews, etc.)

22. Does the Company have an established procedure for editing or removing content from its website that might be construed as libelous, slanderous, or infringing on the intellectual property rights of others (including but not limited to copyrights, trademarks, trade names, etc.)?  Yes  No

23. Does any of the Company's content include:

- Sweepstakes/Lotteries       Pornography/Adult Content       Downloadable Software       Apps

## Part VI – MATERIAL CHANGE AND FRAUD WARNING

### A. MATERIAL CHANGE

If there is any material change in the answers to the questions in this Application prior to the Inception Date of any policy that may be issued, the Company must notify us in writing and any outstanding quotation or binder may be modified or withdrawn. The undersigned Officer of the Company declares that to the best of his or her knowledge the statements set forth herein are true and correct and that reasonable efforts have been made to obtain sufficient information from each and every Insured proposed for this insurance to facilitate the proper and accurate completion of this Application. The signing of this Application does not bind the undersigned to purchase the insurance. The **Insured** represents that the particulars and statements contained within the **Application** are true, complete, accurate, and agrees that this Policy is issued in reliance on the truth of that representation, and that such particulars and statements, which are deemed to be incorporated into and to constitute part of this Policy, are the basis of this Policy. In the event of any material misrepresentations, untruth, or other omission in connection with any of the statements or facts in the **Application**, the knowledge of one **Insured** will not be imputed to another **Insured**; provided, however, this Policy will be void with respect to:

- (1) any **Employee** who knew of such misrepresentation, untruth, or omission; and
- (2) the Company, but only if an officer, director, managing member, partner or similar executive of the Company knew of such misrepresentation, untruth or omission.

### B. FRAUD WARNING

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

**This Application must be signed by the Chairman of the Board, President, Chief Executive Officer, Chief Operating Officer, Chief Financial Officer, Chief Information Officer or functional equivalent of the Company.**

**Signature** \_\_\_\_\_

**Title** \_\_\_\_\_ **Date** \_\_\_\_\_