



Computer Crime Electronic Funds Transfers Questionnaire

Application is hereby made by _____

Please attach a list of all Insureds _____

Principal Address _____ City _____ State _____ Zip _____

Policy Effective Period _____ to _____

1. Do you transmit or receive transfer instructions or data by (check all that apply)

- Telephone
 Email
 Fax
 Internet
 Point-to-Point PC Connection
 Other _____

2. Wire Transfer Procedures

	Yes	No
1. Do you maintain a fully-documented manual covering all wire transfer procedures?	<input type="checkbox"/>	<input type="checkbox"/>
a. If yes , when was it last updated? _____		
b. If yes , does this manual clearly specify:		
1. Positions authorized to enter & update recipient account data?	<input type="checkbox"/>	<input type="checkbox"/>
2. Positions authorized to initiate new repetitive & non-repetitive wire transfer requests?	<input type="checkbox"/>	<input type="checkbox"/>
3. Positions authorized to enter transactions?	<input type="checkbox"/>	<input type="checkbox"/>
4. Positions authorized to verify transactions?	<input type="checkbox"/>	<input type="checkbox"/>
5. Positions authorized to approve transactions?	<input type="checkbox"/>	<input type="checkbox"/>
6. Use of message authentication codes (MAC) for computerized transactions?	<input type="checkbox"/>	<input type="checkbox"/>
7. Procedures for key management and key security?	<input type="checkbox"/>	<input type="checkbox"/>
8. Use of callback & authentication for non-computerized wire transfer requests?	<input type="checkbox"/>	<input type="checkbox"/>
9. Processing & documenting emergency transfer requests or other exceptions?	<input type="checkbox"/>	<input type="checkbox"/>
2. Is there an Information Security Policy in place that has been approved by management and communicated to all appropriate parties?	<input type="checkbox"/>	<input type="checkbox"/>
If yes , does this policy cover the following areas:		
1. Security Awareness Training?	<input type="checkbox"/>	<input type="checkbox"/>
2. Acceptable use?	<input type="checkbox"/>	<input type="checkbox"/>
3. E-mail & Internet Communications?	<input type="checkbox"/>	<input type="checkbox"/>
4. Device Security (Desktop/Laptop/Mobile)?	<input type="checkbox"/>	<input type="checkbox"/>
5. Remote access?	<input type="checkbox"/>	<input type="checkbox"/>
6. Disaster Recovery and Business Continuity?	<input type="checkbox"/>	<input type="checkbox"/>
7. Incident Response?	<input type="checkbox"/>	<input type="checkbox"/>
8. Use of callback & authentication for non-computerized wire transfer requests?	<input type="checkbox"/>	<input type="checkbox"/>
9. Password Management?	<input type="checkbox"/>	<input type="checkbox"/>
3. Is there an Information Security Officer in place that reports to Senior Management?	<input type="checkbox"/>	<input type="checkbox"/>
If yes , is the Information Security Officer:		
1. Responsible for the creation of policies and procedures?	<input type="checkbox"/>	<input type="checkbox"/>
2. Required to see that segregation of duties exist and are maintained between all Security Engineers and IT Administrators?	<input type="checkbox"/>	<input type="checkbox"/>
4. Are signature cards or similar documents maintained within the wire department for all persons authorized to initiate or approve wire transfers?	<input type="checkbox"/>	<input type="checkbox"/>

2. Wire Transfer Procedures *continued*

5. Regarding the volume & percentage of repetitive and non-repetitive wire transfers, please answer the following for the last three months:

	Repetitive Wires	% of Total	Non-Repetitive Wires	% of Total
Average daily volume?	\$		\$	
Average daily dollar total?	\$		\$	
Average monthly volume?	\$		\$	
Average monthly dollar total?	\$		\$	
Maximum dollar transaction?	\$		\$	

- | | Yes | No |
|--|--------------------------|--------------------------|
| 6. Are all payment instructions executed under a sequential numbering system? | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Can a single individual authorize a wire transfer request? | <input type="checkbox"/> | <input type="checkbox"/> |
| a. If yes , what is the largest amount? _____ | | |
| b. If yes , what position is authorized to make the above request? _____ | | |
| c. Can non-repetitive wires be sent to any beneficiary?
If no , how are any restrictions enforced? _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Have independent individuals been designated in writing to review and reconcile all wire transfers at the end of each day? | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Regarding fund transfer capabilities, please answer the following: | | |
| a. Are fund transfers conducted using a bank and/or other financial institution, i.e. you manually issue transfer instructions to the sender? | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Are fund transfers conducted using application software owned by a bank or financial institution, but operated on workstations on your premise? | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Are fund transfers conducted using proprietary or off-the-shelf software operated on workstations at your premise? | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Are fund transfers conducted using a method not described previously? | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. If banks or financial institutions are used for completing fund transfers (Method 10A), please answer the following: | | |
| a. With how many banks or financial institutions do you have fund transfer relations? _____ | | |
| b. Are there specific arrangements with such banks as to individuals in your company authorized to: | | |
| 1. Transfer funds? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Request changes in procedures? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Obtain records? | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Are all telephone, e-mail or fax instructions given to banks or financial institutions confirmed in writing within one business day? | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Are all banks or financial institutions required to authenticate the identity of a caller, e-mailer, or faxer before acting upon his or her instructions? | <input type="checkbox"/> | <input type="checkbox"/> |
| 1. Telephone caller | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. E-Mail sender | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Fax sender | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Describe the methods used to authenticate each of the above: _____
_____ | | |
| f. Describe the internal controls which ensure that fraudulent instructions cannot be given to any bank or financial institution by persons WITH authority to give genuine instructions: _____
_____ | | |
| g. Describe the internal controls which ensure that fraudulent instructions cannot be given to any bank or financial institution by persons WITHOUT authority to give genuine instructions: _____
_____ | | |
| 11. Is there segregation of duties in place so that no one employee can handle wire transfer transactions from commencement to completion without the aid of other individuals? | <input type="checkbox"/> | <input type="checkbox"/> |

3. Security

Yes No

<p>1. Regarding security of computer passwords, please answer the following: <i>(Please consult with the CIO and/or MIS Director)</i></p> <p>a. What is the minimum number of characters in the password? _____</p> <p>b. How often does the SYSTEM force the user to change passwords? _____</p> <p>c. Does the password REQUIRE the use of the following? <i>(Check all that apply)</i></p> <p><input type="checkbox"/> Alpha characters <input type="checkbox"/> Capital letters <input type="checkbox"/> Lower case letters <input type="checkbox"/> Numeric characters <input type="checkbox"/> Special characters</p> <p>d. Do the password controls PROHIBIT the following:</p> <p> 1. Repeating contiguous characters? <input type="checkbox"/> <input type="checkbox"/></p> <p> 2. Re-using prior passwords after less than 15 iterations of passwords? <input type="checkbox"/> <input type="checkbox"/></p>		
<p>2. Are the following controls in place to prevent unauthorized use of computers that are utilized for wire transfer transactions?</p> <p>a. The terminals are in a secure area accessible only by wire transfer personnel? <input type="checkbox"/> <input type="checkbox"/></p> <p> If yes, is access control maintained through the use of key cards or biometric devices? <input type="checkbox"/> <input type="checkbox"/></p> <p>b. CCTV is used to monitor the activities of the personnel using terminals? <input type="checkbox"/> <input type="checkbox"/></p> <p>c. The computer program for managing, initiating, approving and sending wire transfers is not accessible to unauthorized personnel? <input type="checkbox"/> <input type="checkbox"/></p> <p>d. The computer program for managing, initiating, approving and sending wire transfers is not visible on the terminals of unauthorized personnel? <input type="checkbox"/> <input type="checkbox"/></p> <p>e. The computer program for managing, initiating, approving and sending wire transfers is time restricted, i.e., can only be operated on specified days and during specified times? <input type="checkbox"/> <input type="checkbox"/></p> <p>f. Any attempt to gain unauthorized access to the wire transfer program results in an immediate alert in the form of a computer pop-up, e-mail, text message, or other similar warning. <input type="checkbox"/> <input type="checkbox"/></p> <p> If yes, please specify who receives the alerts <i>(check all that apply)</i></p> <p><input type="checkbox"/> IT Security <input type="checkbox"/> Corporate Security <input type="checkbox"/> Audit Department <input type="checkbox"/> Wire Transfer Management <input type="checkbox"/> Other _____</p>		
<p>3. Is physical access to the premises restricted? <input type="checkbox"/> <input type="checkbox"/></p>		
<p>4. Are access control rights for each function/role reviewed and approved? <input type="checkbox"/> <input type="checkbox"/></p>		
<p>5. Is visitor access to the premises controlled and monitored? <input type="checkbox"/> <input type="checkbox"/></p> <p> If yes, does this include the Data Center? <input type="checkbox"/> <input type="checkbox"/></p>		
<p>6. Please answer the following if the terminals used for wire transfer management, initiation, verification, approval, or sending utilize the Internet or have Internet access <i>(please consult the CIO and/or MIS Director and check all that apply)</i></p> <p><input type="checkbox"/> Firewall <input type="checkbox"/> Virus Protection <input type="checkbox"/> Intrusion Detection System <input type="checkbox"/> Intrusion Prevention System</p> <p>a. Are all computer attacks or unauthorized intrusion attempts logged and investigated? <input type="checkbox"/> <input type="checkbox"/></p> <p>b. Does the company have a designated team of personnel to provide 24-hour response to any serious computer attack? <input type="checkbox"/> <input type="checkbox"/></p> <p>c. Is all wire transfer data in storage and transit encrypted? <input type="checkbox"/> <input type="checkbox"/></p> <p>d. When was the last system penetration test conducted by a third-party or by an IT audit team?</p> <p><input type="checkbox"/> Never <input type="checkbox"/> In the last 12 months <input type="checkbox"/> More than 12 months ago</p>		

NOTICE TO APPLICANTS: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime.

Signature _____ Title _____ Date _____