

Important notice concerning disclosure of material information

We take this opportunity to remind you that you owe a duty to make a fair presentation of the risk to the insurer. You have a duty to disclose to the insurer every material circumstance which you know or ought to know after a reasonable search or which is sufficient to put the insurer on notice that it needs to make further enquiries for the purpose of revealing those material circumstances. In addition, you have a duty to disclose information in a clear and accessible manner.

A circumstance is material if it would influence a prudent insurers judgment in determining whether to take the risk and, if so, on what terms.

Failure to disclose a material circumstance may entitle an insurer to:

- in some circumstances, avoid the policy from inception and in this event any claims under the policy would not be paid;
- impose different terms on your cover; and/or
- reduce the amount of any claim payable.

This duty applies:

- before your cover is placed;
- when it is renewed; and
- at any time that it is varied.

Name & address of your firm

Full name

Street City

Postcode Country

Turnover/Income

1 What was your turnover/income in each of the last two completed financial years? (GBP)

Year	UK business	US business	Rest of the world
.....
.....

2 What was your turnover/income for the current financial year?

Year	UK business	US business	Rest of the world
.....
.....

Personally Identifiable Information (PII) records

- 1 Please advise approximate number of Personally Identifiable Information (PII*) Records stored on your network, database or system.

* PII is defined as a personally identifiable record that can be used to identify, contact or locate a single individual.

Security & privacy protection

	Yes	No		
1. Do you run industry-grade firewalls and anti-virus software across your network?	<input type="checkbox"/>	<input type="checkbox"/>		
2. Do you encrypt all portable media, including phones, tablets and USB memory sticks? (simple password protection constitutes 'encryption' for these purposes)	<input type="checkbox"/>	<input type="checkbox"/>		
3. Do you have recovery/continuity plans to minimise/avoid business interruption due to network failure, which may include outsourcing, system redundancy etc.	<input type="checkbox"/>	<input type="checkbox"/>		
4. Are these plans regularly tested and updated?	<input type="checkbox"/>	<input type="checkbox"/>		
5. Do you secure any remote access to your network and data?	<input type="checkbox"/>	<input type="checkbox"/>		
6. Do you enforce a policy of auditing and managing computer and user accounts?	<input type="checkbox"/>	<input type="checkbox"/>		
7. Are you Payment Card Industry Data Security Standard (PCI DSS) compliant if applicable? (These are information security standards applicable to organisations that handle branded credit cards from Visa, Mastercard, American Express etc.)	<input type="checkbox"/>	<input type="checkbox"/>		
8. Network dependency – How soon will your business be impacted if you lose access to your site/systems? Give time blocks – 6, 12, 24 or 48 hours	<input type="checkbox"/> 6hr	<input type="checkbox"/> 12hr	<input type="checkbox"/> 24hr	<input type="checkbox"/> 48hr
9. Do you back up critical data at least once per week?	<input type="checkbox"/>	<input type="checkbox"/>		
10. Do you have processes in place to identify and apply critical patches?	<input type="checkbox"/>	<input type="checkbox"/>		
11. Do you have processes in place to validate new supplier accounts, raise awareness of Social Engineering, and for a senior member of staff to sign off electronic transfers from the Insured's own funds greater than £5k?	<input type="checkbox"/>	<input type="checkbox"/>		
12a. Do you outsource any element of your network?	<input type="checkbox"/>	<input type="checkbox"/>		

12b. If YES, please provide details:

Your network

Name of supplier/s

Web/portal hosting

.....

Information security

.....

Application or data processing

.....

Credit card processing

.....

Other

.....

Claims & events history

1a. During the past 12 months, has the Company:

- ✓ Experienced any unscheduled or unintentional network outage, intrusion, corruption or loss of data?
- ✓ Become aware of any privacy violations or compromise of Personally Identifiable Information?
- ✓ Notified any customers that their information may have been compromised?
- ✓ Become aware of any circumstance or incident that could be reasonably expected to give rise to a claim against the Cyber Insurance policy under consideration?

Yes

No

1b. If **Yes** to any of the above, please provide details:

Declaration

I/We declare that the answers to the questions in this proposal form are true and accurate having consulted with all partners or directors and other persons involved in the management of the applicant firm.

This application must be signed by a corporate officer with authority to sign on the applicant's behalf.

I/we understand that the information provided will be used in deciding whether the insurer will accept the application, the terms of any policy provided and the price charged by the insurer for the risk

Signature of Partner/ Director

Name of Partner/ Director

Date

A copy of this proposal should be retained by you for your own records.

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