# **Security & Privacy Protection Insurance**



# Cyber Proposal Form

### 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.

#### **General Data Protection Regulation**

Any information about **You** which you provide to **Us** will be processed by **Us** in compliance with the General Data Protection Regulation, for the purpose of providing insurance and handling claims, if any, which may necessitate providing such information to third parties.

### 01. General information

Name & Address of Applicant	
Company name	
Company name	
Street	City
Postcode	Country
Website	Staff No:
Business Activities	

# **01. General information** continued

т	Turnover/Income					
Turnover, mediae						
	Year end:		Currency:			
		Last complete financial year	Current year (estimate)	Next year (estimat	te)	
	UK turnover/income					
						······
	US turnover/income					
	Rest of World (ROW)* turnover/income					
	*For ROW. please provide a	split by country as an appendix to this	application			
<b>)2.</b>	Risk assessme	nt				
D	ata					
1.		nate number of Personally Identif n your network, database or syste				<u>.</u>
	*PII is defined as a personal	lly identifiable record that can be used t	o identify, contact or locate a single indiv	idual.		
2.	Does the applicant:			Υ	es/es	No
	a) Isolate critical/sensi	tive data in its own segregated er	nvironment?			
	b) Encrypt critical/sens	sitive data whilst 'at rest'?				
	c) Encrypt critical/sens	sitive data 'in transit'?				
N	etwork Security Ass	sessment				
					es/es	No
	Do you:			•	163	110
1.		ests of your network at least annua				
	If 'Yes', please confirm t remediated /actioned	that all high critical findings / reco	ommendations have been			
2.	Have firewalls at all ext	ernal connection points?				
3.	Run anti-virus on your	network?				
4.	Have intrusion prevent	ion or detection software in place	e?			
	If 'Yes', is there a proces	ss in place to review intrusion log	s and immediately escalate critica	l alerts?		

### **Mobile & Portable Devices**

Does the applicant: Yes No

1. Store sensitive data on any mobile or portable device, including back-up tapes?

If 'Yes', is such sensitive data encrypted?

2. Permit Bring-Your-Own-Device (BYOD)?

If 'Yes', does the applicant have a policy that governs BYOD usage and controls?

### **Data Recovery & Network Business Interruption Assessment**

How long does it take to restore the applicant's critical systems following a network outage?

Less than 8 hours Between 8 and 12 hours

Between 12 and 24 hours More than 24 hours

### **Network Security**

1. Please tick below to indicate which of the following the applicant has in place?

**Business Continuity Planning** 

Incident response plan

Disaster recovery plan

Yes No

2. Are these regularly tested and updated (at least annually)?

If 'No', when was the last test/update conducted?

### **Multimedia Assessment**

Does the applicant: Yes No

- Have a process in place to review media content (website, social media or otherwise prior to publication)?
- 2. Have processes in place to take down content that is deemed offensive?

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1.	Please identify all vendors that have access to the applicant security systems	's data or who help to manage the applicant's net	work	or	
Na	me of Vendor	Nature of Service			
					······
					······
					<u>.</u>
					············
					·····
			Yes		No
2.	Do Vendors have access rights to the applicant's network?				
	i) If 'Yes', are Vendor access rights periodically reviewe	d?			
	ii) Is Vendor access on the applicant's network monitor	red?			
3.	Does the applicant comply with privacy and data protection jurisdictions and industry standards in which it operates? (e Protection Regulations, Australian Data Privacy Principles)				
P	ayment Card Industry Assessment				
			Yes		No
1.	Does the applicant accept credit card payments for its good	or services?			
	If 'Yes':	1.	2.	3.	4.
	i) What level of PCI merchant is the applicant?				
	ii) What is the approximate percentage of annual revenue card transactions?	e attributable to credit			
	iii) How many credit or debit card transactions does the a	applicant process annually?			
2.	Is the applicant compliant with Payment Card Industry Data application date?	Security Standards as of this			

Pa	ayment Card Industry Assessment (continued)		
		Yes	No
3.	Does the applicant store credit card data on its network?		
	If 'Yes':		
	i) Is credit card data either encrypted or tokenised at all times?		
	ii) If the credit card data is not encrypted or tokenised, how is it secured?		
4.	Is credit card data sent to a payment processor?		
	If 'Yes', has the payment processor provided evidence of its PCI compliance to the applicant?		
Cl	aims & Event History		
Dι	uring the past 12 months, has the Company:	Yes	No
1.	Experienced any unscheduled or unintentional network outage, intrusion, corruption or loss of data?		
2.	Become aware of any privacy violations or compromise of Personally Identifiable Information?		
3.	Notified any customers that their information may have been compromised?		
4.	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?		
5.	In the last 5 years, has the applicant received or sustained, or is there currently pending, any claims, complaints or incidents which may be covered under the proposed insurance and/or does the applicant have knowledge of any fact, circumstance, situation, event or transaction which may give rise to a claim or loss under the proposed insurance?		
	If 'Yes' to any of the above, please provide details:		

In	Insurance History					
		Yes	No			
1.	Does the applicant presently procure a stand-alone cyber insurance policy?					
2.	During the last 5 years, has any insurance policy providing materially the same or similar insurance as the insurance being applied for under this application been declined, cancelled or non-renewed at the decision of the insurer?  If you entered 'No' to the above, please provide further details.					

Ra	nsomware		
Ita		Yes	N
1.	Please confirm that an email filtering system is used and tha		
2.	Does the email filter provide the following protections? Pl	ease tick all that apply:	
	screenings for malicious attachments/links	quarantine service	
	reputation checks	email fraud defence (DMARC)	
3.	Do you use Office 365 in your organisation?		
	If 'Yes', tick all that apply:		
	Office 365 Advanced Threat Protection add-on	multi-factor authentication for all users of Office 365	
4.	Do you use endpoint detection and response (EDR) tools for	or malware protection?	
5.	Do you have a Security Operations Centre (SOC) in place?		
	If 'Yes', tick all that apply:		
	24/7 MSSP SIEM		
	Please confirm you secure any and ALL remote access to thei services by requiring multi-factor authentication. This relate third party vendors granted authorised access, via any mean to the company network when at a physical location owned c	s to access by any party, including as other than a wired connection	
7.	Do you use multi-factor authentication to protect privileg	ed user accounts?	
8.	Are access controls based upon the principle of least privi	ilege?	
9.	Do you back up critical data regularly (minimum once per v	week)?	
	Are your back-ups disconnected from and inaccessible thr you use a dedicated cloud storage provider, designed for t		
11.	Do you test the successful restoration and recovery of key data from back-ups?	server configurations and	
12.	Do you have a secure/hardened baseline configuration wh someone with the security expertise and/or in line with in		
	Have you undertaken a Network scan regarding unauthori the past 60 days?	sed access/malware etc. within	
14.	Confirmation that processes are in place to identify and a	pply patches within 30 days of release	
15.	If you answered 'No' to any of the above, please provide ac	dditional details.	
	Please describe any additional steps your organisation tal segmentation, software tools, external security services,		

### **Declaration**

#### Duty to make a fair presentation of the risk/disclose material information

From 12 August 2016, the duty of disclosure for commercial insurance contracts changed with the implementation of the Insurance Act 2015 ("The Act"). For risks incepting or renewing on or after 12 August 2016, you have a duty to make "a fair presentation of the risk". To meet this duty, you need to disclose all material information to Insurers which is known to you (or which ought to be known to you). Information is material if it would influence the judgement of a prudent insurer in establishing the premium or determining whether to underwrite the risk and, if so, on what terms. Material information does not necessarily have to actually increase the risk of the insurance under consideration.

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

Title	Name of Partner/ Director	
Signature of Partner/ Director		
Date		

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

#### dualgroup.com/cover-cyber

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