

## Questions for Coalition Cyber Insurance and (Optional) Technology Errors & Omissions Insurance

Responses to the questions below are necessary to obtain a quotation for Cyber insurance from *Coalition* and, if desired, Technology Errors & Omissions coverage. After a quotation for insurance is bound, the *Named Insured* will be asked to electronically sign an application populated with the responses from the questions below.

### General Information

NAMED INSURED

WEBSITE DOMAIN(S)

ADDRESS	CITY	PROVINCE	POSTAL CODE
INDUSTRY	NUMBER OF EMPLOYEES	REVENUE expected over next 12 months \$	GROSS PROFIT / NET REVENUE expected over next 12 months \$

### Attestation Questions

1 Within the last 3 years has *Named Insured* suffered any cyber incidents resulting in a claim in excess of \$25,000? NO YES

(If Yes) please explain the cyber incidents and/or claims.

2 Is *Named Insured* aware of any circumstances that could give rise to a claim under this insurance policy? NO YES

(If Yes) please explain the circumstances and/or potential claims.

3 Does *Named Insured* implement encryption on laptop computers, desktop computers, and other portable media devices? NO YES SOMETIMES

4 Does *Named Insured* collect, process, store, transmit, or have access to any Payment Card Information (PCI), Personally Identifiable Information (PII), or Personal Health Information (PHI) other than employees of *Named Insured*? NO YES

4a (If Yes) What is the estimated annual volume of payment card transactions (credit cards, debit cards, etc.)?

NO RECORDS    LESS THAN 100,000    100,000 – 500,000    500,000 – 1,000,000    OVER 1,000,000:

4b (If Yes) How many PII or PHI records does *Named Insured* collect, process, store, transmit, or have access to?

NO RECORDS    LESS THAN 100,000    100,000 – 500,000    500,000 – 1,000,000    OVER 1,000,000:

5 Does *Named Insured* maintain at least weekly backups of all sensitive or otherwise critical data and all critical business systems offline or on a separate network? NO YES N/A

6 Does *Named Insured* require a secondary means of communication to validate the authenticity of funds transfers (ACH, wire, etc.) requests before processing a request in excess of \$25,000? NO YES N/A

7 Within the last 3 years has *Named Insured* been subject to any complaints concerning the content of its website, advertising materials, social media, or other publications? NO YES N/A

8 Does *Named Insured* enforce procedures to remove content (including third party content) that may infringe or violate any intellectual property or privacy right? NO YES N/A

All questions on page 1 must be completed for both standalone Cyber insurance and Technology Errors & Omissions coverage.

Questions below are required only for Technology Errors & Omissions coverage.

## Technology Errors & Omissions Questions

1 Please describe the company's use of technology in delivering its product and/or services.

2 Within the last 3 years has *Named Insured* been subject to a dispute or claim arising out of a technology error or omission in excess of \$25,000? NO YES N/A

3 Is *Named Insured* operating as a managed service provider (MSP), or does *Named Insured* participate directly in or sell technology products/services designed for any of the following industries? NO YES

- |                      |                    |   |  |
|----------------------|--------------------|---|--|
| • Cryptocurrency     | • Blockchain       | • Payment Processing                              | • Professional Services (Legal, Medical, A&E, or other licensed professional services) |
| • Cannabis           | • Automotive       | • Adult Entertainment                             |  |
| • Internet of Things | • Aviation         | • Payment Processing                              |  |
| • Financial Services | • Military/Defence | • Point of Sale (POS) Software/ Hardware/Reseller |  |
| • Healthcare         | • Gambling         |   |  |

4 How often are *Named Insured's* services provided by written agreement or contract?

[100% OF AGREEMENTS OR CONTRACTS](#)

[< 50% OF AGREEMENTS OR CONTRACTS](#)

[≥ 50% OF AGREEMENTS OR CONTRACTS](#)

[0% OF AGREEMENTS OR CONTRACTS](#)

5 Identify the standard risk mitigating clauses or methods contained within *Named Insured's* agreements or contracts. (Select all that apply)

[A. CUSTOMER ACCEPTANCE / FINAL SIGN OFF](#)

[E. EXCLUSION OF CONSEQUENTIAL DAMAGES](#)

[B. DISCLAIMER OF WARRANTIES](#)

[F. INDEMNIFICATION CLAUSE](#)

[C. HOLD HARMLESS AGREEMENTS THAT BENEFIT NAMED INSURED](#)

[G. BINDING MANDATORY ARBITRATION](#)

[D. LIMITATION OF LIABILITY](#)

[H. PROJECT PHASES / MILESTONES](#)