

Company Information			
Company:			
Website Address:			
Postal Address:			
Postcode:			
Email Address:			
Do you require cover for any other stated as your main postal address. If 'Yes', please provide details		re not YES	NO
Business Established Since:			
Number of employees:			
Please provide a description of yo	our business services	5:	
Please sive a breakdown of your	turnovor including	foo income for the na	et and current financial
Please give a breakdown of your years, and estimate for the next		ree income, for the pas	st and current illiancial
Financial year end (date)			
Total turnover including fee income:	Past Year (actual)	Current Year (estimate) £	Next Year (estimate)
Profit (net before income tax)		£	£



-	ed percentage split of t	turnover including fee incon	ne by geographical
territory:	Past Year (actual)	Current Year (estimate)	Next Year (estimate)
United Kingdom Clients	%	%	%
European Clients	%	%	%
USA and Canadian clients NOT subject to USA/Canada law	%	%	%
USA and Canadian clients subject to USA/Canada law	%	%	%
Rest of the World clients	%	%	%
Total %	100%	100%	100%
Network and data stop Please provide brief detail		our internal IT network:	
Please provide details of t	he size of your IT netw	vork, number of:	
Computer Users:		Portables: (laptops, smartphones, notebooks, tablets)	
Servers:		Server Location:	
PC's:			
Please provide a financial limited to hardware, softw		network (including but not vare):	£
Please estimate the total records, including employe		lly Identifiable Informatior tyour company holds.	

Personally Identifiable Information is defined as: *information that can be used to uniquely identify, contact, or locate a single person or can be used with other sources to uniquely identify an individual.*



	Yes	No
Do you see this changing substantially in the next 12 months?		
If 'Yes' please provide details below:		
The preude provide details below		
Please highlight which bands of Personally Identifiable Information records you hold	l:	
Low Sensitivity		
Name Email address		
Moderate Sensitivity		
Home Address Protected health information		
Telephone Number Date of Birth Insurance policy number National Insurance number		
Drivers Licence Number Passport number		
High Sensitivity		
Bank or Saving Account number Debit Card number		
Credit Card number		
Please estimate what proportion of the total number of Personally Identi	ifiable	0/
Information records you hold include a highly sensitive element:		%
	Yes	No
Do you seek explicit consent from all third parties before selling or sharing their		
Personally Identifiable Information?		
If 'No' please provide details:		
	Yes	No
Do you outsource any part of your IT network including but not limited to data		140
storage, data hosting and/or data-processing of Personally Identifiable Information Records?		
Records:		
If 'Yes' please provide the name of the third-party company:		



	Yes	No
If 'Yes', do you ensure that the countries in which these third-parties hold your Personally Identifiable Information records have strict government legislation and regulation on data protection?		
If 'No' please provide details below:		
Do you have a written contract in place with these parties that will indemnify you for IT system or data security breaches arising from their services? If 'No' please provide details below:	Yes	No
Network and data security		
Do you have a Chief Information Officer (CIO) and/or a Chief Security Officer (CSO)?	Yes	No
If 'No' please provide details of who controls your IT network and data/information s	security:	
Do you adhere to and comply with the following:	Yes	No
Data Protection Act 1998:		
Privacy and Electronic Communications Regulations:		
Payment Card Industry (PCI) Data Security Standards		
ISO 27001:		
If 'No' please provide details below:		
Have you had a third party security audit undertaken on your IT network?	Yes	No
If 'Yes' have you implemented the recommendations of the audit?	Yes	No



If 'No' please provide details:				
			Yes	No
Do you ensure that all Personally Identifiable Information red and held at a secondary location?	cords a	are backed up		INO
If 'No' please provide details:				
			Yes	No
Do you have firewalls protecting all external IT network gatewa	ays?			
If 'No' please provide details:				
		·		
			V	Na
Do you use encryption tools to ensure the integrity and opersonally Identifiable Information records including those on records.		•	Yes	No
If 'No' please provide details:				
Do you use anti-virus software and anti-spyware?			Yes	No
If 'No' please provide details:				
			Yes	No
Do you have a vulnerability assessment program that moni security and data security breaches and ensures timely update anti-spyware signatures and critical security patches?				
If 'No' please provide details:				



	Yes	No
When recruiting new employees to you undertake thorough background checks before employment is offered? Such as CRB (Criminal Record Bureau), Identity, Qualifications, Disciplinary.		
If 'No' please provide details:		
Do you have an internet and email usage policy written into all employment contracts which is clearly communicate to all employees? If 'Yes', does this permit the monitoring and investigation of computer activity of your employees?	Yes	No No
If 'No' to either of the above, please provide details:		
Do you implement a data protection policy for the handling of data including Personally Identifiable Information records which is clearly communicated to all employees? If 'No' please provide details:	Yes	No
Trivo piedse provide details.		
Do you have physical controls and registration for visitors at your company's entrance area? If 'No' please provide details:	Yes	No
Are all Personally Identifiable Information records, including those contained in a physical form (paper, disks, CDs, hard drives), disposed of or recycled by a confidential and secure means which is recognised throughout the organisation? If 'No' please provide details:	Yes	No



Business Impact	
How fast are you likely to incur a loss of profit as a result of ar system downtime?	n IT network compromise and a total
Level 1: 48 hours+ Level 3: 12-24 hours	Level 5: Immediately
Level 2: 24-48 hours Level 4:1-12 hours	
In the event of your IT network being subjected to a non-sche and total downtime; please estimate your maximum daily loss profit before tax).	of profit (net £
Do you have a disaster recovery plan which protects you agunexpected failure of your IT network and security breach/data If 'No' then please advise how you would deal with such an even	a compromise?
If 'Yes':	Voc. No.
Is the back-up system managed by a Third Party	Yes No
How Regularly is it tested?	
When was it last tested?	
How long did it take to switch to this back-up system	
Online Media	
Do any of your websites (including websites you may host following:	
Financial transactions via payment cards	Yes No
Medical records or private information of individuals	
Legal advice or services	
Streaming music or video	
Social Networking	



If you answered 'Yes' to any of the above please provide details below:		
	Yes	No
Do you have a privacy policy on your website?		110
If 'No' then please provide details:		
Do you have a specific policy for managing all 'opt-in'/'opt-out' market including the use/storage of cookies on a browsers system/device?		No
Do you have a procedure for responding to allegations that controls displayed or published is libellous, infringing intellectual property rights of a third party's privacy rights? If 'No' please provide details:	ent created,	No
I No piedse provide details.		
Are third-parties able to contribute to message boards, chat rooms of your websites (including websites you may host for third-parties)? If 'Yes', please describe what procedures you have in place for monitor posted on your website including your "take-down" policy.	or forums on	No tent
	Voc	No
Do you have a qualified lawyer (or other legally qualified individua content prior to posting on your websites (including websites you nthird-parties)?	I) review all	No
If 'No' then who authorises this?		



					Yes	No
Do you obtain written warrant they have created for you (inclu			parties fo	r content		
If 'No' please provide details:						
Claims and insurance hist	cory					
Have you previously been insur	ed in respec	t of Cyber and Data	Security?		Yes	No
If 'Yes' please provide details:						
		Cyber and	d Data Sec	urity		
Insurer		·				
Limit of Indemnity						
Excess (each & every claim)						
Premium						
Expiry Date						
Has your business ever been policy, or had an existing policy If 'Yes' please provide full detai	cancelled?	a Cyber and Data	Secu <mark>rity</mark>	insurance	Yes	No
					Yes	No
Have you ever experienced an circumstance under a cyber ar hacking incident, virus or malicisecure data, wrongful disclosurivacy? If 'Yes' please provide deta	nd data secu ious code at ire of perso	urity policy, including tack, cyber extortior nal data or interfer	g but not attempt, ence with	limited to breach of rights of	to prev	ent a
reoccurrence?						



Please provide details of any matter which	•				leration of your
proposal and which has not been disclosed	1 elsewh	nere in this pi	roposal		
Declaration					
I/We declare that this proposal has be statements and particulars in this proposat that I/We have neither misrepresented or	al (inclu	iding all attac	chment	s, if applicable	
I/We undertake to inform Underwriters of before or after the completion of the contr	•		ion to	these facts wh	ether occurring
Signature of Principle/Partner/Director					
Date					