

Esurance™ Proposal Form

This is a proposal for a claims made policy

The policy will only respond to claims and/or circumstances, which are first made against the Insured and notified to the Insurer during the policy period. **The policy will not provide cover for:-**

- Events that occurred prior to the retroactive date of the policy (if specified).
- Claims made after the expiry of the policy period even though the activity giving rise to the claim may have occurred during the policy period.
- Claims notified or arising out of facts or circumstances notified under any previous policy or noted on the current proposal form or any previous proposal form.
- Claims made, threatened or intimated prior to the commencement of the policy period.
- Facts or circumstances in your knowledge prior to the policy period, which you knew had the potential to give rise to a claim under the policy.

DISCLOSURE

You must disclose to the Insurer all information which is material to it in deciding whether to issue insurance cover to you, including any facts or conduct which might lead to a claim being made against you. Failing to do so could affect your rights to indemnity.

If you do not understand any part of this document, please contact your Broker BEFORE YOU SIGN IT. You will be bound by the answers, which are given, and by the information provided by you in this proposal form. It is in your interest to make sure that all information is correct and properly understood.

When in doubt disclose

ATTACHMENTS

Before you return this form, have you included the following (please indicate by ticking the boxes):

- Standard client contract agreement:
- Company brochure/ additional information:
- Claims information (if applicable):
- I.T network security audit (if applicable):
- Disaster recovery plan:

Application for Esurance™ effected by CFC Underwriting Ltd on behalf of certain Underwriters at Lloyd's of London through:-

Section 1: Company Details

- 1.1 Please state the name and address of the principal Company for whom this insurance is required. Also list the subsidiaries for whom you require cover in your answer to question 1.5. Cover is provided for these subsidiaries of the principal Company, but only if you include the data from all of these subsidiaries in your answers to **all** of the questions in this form. Due to the nature of the risks covered, this insurance only applies to those companies that share the same management controls and I.T. security procedures (see especially sections 3 & 4 of this form).

Insured Company:	
Contact name:	
Address:	
Telephone:	
Email Address:	
Fax:	
Website(s):	

- 1.2 When was the principal Company established?

- 1.3 i) State the total number of partners/ directors:

- ii) State the number of employees;

in marketing/ sales/ business development

in I.T. / technical

all other

- iii) State the total number of partners/ directors AND employees with direct access to email (including internal email) or the internet.

- 1.4 **For the purpose of this question, one 'visit' is a series of page-impressions or 'hits' by a user ending when there is a gap of at least 30 minutes between 2 page impressions by the user).**

How many visits do you expect to your website(s) on average per month?

- 1.5 Please state the following for all subsidiaries for whom you require cover.

Name of Subsidiary	Country of Domicile	Principal Activity

1.6 Tick here if you would like to receive the CFC Underwriting technology risk email newsletter. Please note that we will not use your email address for any purpose whatsoever, other than to send you this newsletter. You can unsubscribe at any time.

Please enter the email address to send this to: As above / _____

Section 2: Activities

2.1 Please indicate all of the following activities which are applicable to your operations.

1. Internet Access. <i>Your staff are able to browse the internet and use email</i>	YES	NO
2. Internet Brochure. <i>You have a website with information about your company</i>	YES	NO
3. Content Provider. <i>You provide online content for use by third parties</i>	YES	NO
If YES, does this content change at least weekly?	YES	NO
4. Client interactive area. <i>Clients can access private information</i>	YES	NO
Bulletin board/ discussion forum/ chat room	YES	NO
If YES, for any of these services:	Every _____ hours/ days	
• How often do you monitor user activity?	YES	NO
• Do you monitor user activity before or after being posted on a live website?	_____ hours	
• in what timeframe do you remove allegedly offensive material?	YES	NO
Email subscription service	YES	NO
Client access to sensitive / confidential information	YES	NO
Downloadable files	YES	NO
5. Supplier interactive area. <i>Suppliers can link with your systems</i>	YES	NO
6. Online services. <i>Internet based technology services</i>	YES	NO
Application Service Provider	YES	NO
Emarket place	YES	NO
Internet portal	YES	NO
'White labelling' service (online services that you provide under a third party's brand)	YES	NO

7. E-commerce. *You sell goods or services online*

If YES:

- how long have you been conducting e-commerce?
- What do you expect your average transaction through ecommerce to be?
- What do you expect your largest transaction through e-commerce to be?
- Who is your payment processor?

YES

NO

_____ **Months**

2.2 i) Please provide a full description of your activities by percentage of total turnover:

Activity	Percentage of total turnover (%)	Activity	Percentage of total turnover (%)

ii) Please describe the functionality of your website:

2.3 Please state your fees/ turnover received in respect of the following years:

For the purpose of this question, turnover “reliant on your internet uptime” refers to any turnover where the internet, intranet, private service networks or dedicated electronic link is integral to the income. This may include turnover earned from the provision of content, online services, e-commerce, white labelling or online advertising revenue.

Currency: _____

Date of financial year end: ____/ ____ (dd/mm)

	Last complete financial year	Estimate for current financial year	Estimate for next financial year
Domestic turnover: Reliant on your internet uptime			
Domestic turnover: Not reliant on your internet uptime			

USA turnover: Reliant on your internet uptime			
USA turnover: Not reliant on your internet uptime			
Other territory turnover: Reliant on your internet uptime			
Other territory turnover: Not reliant on your internet uptime			
TOTAL turnover:			
OPERATING PROFIT/ (LOSS)			

Section 3: Technical Security

3.1 Please tick whether the following I.T. functions are outsourced, maintained in house, or do not exist.

	Outsourced	Maintained in house	Function does not exist
Web server management			
Firewall management			
Anti-virus software			
• On servers			
• On desktop computers			
Intrusion Detection System			
Back up system			
Uninterrupted power supply system			
Email management, including content filtering			
Application of security software packages			
Payment processing			
Chat room/ discussion forum/ bulletin boards			
Storage of sensitive data such as credit card details			

3.2 Are tapes, disks, files and other media created outside of your organisation checked for viruses and other malicious code prior to use?

YES

NO

3.3 Have you changed the default passwords of all of your routers, and are each of the new passwords different?

YES

NO

3.4 Have you commissioned any external, qualified security consultant for:

(a) A security assessment of your current network? YES NO

(b) Conducting periodic external or internal scans of your security? YES NO

If you have answered YES to either 3.4 (a) or (b), please include a copy of the latest report.

3.5 How often is your computer data backed-up?

3.6 Are your companies' back-ups stored in a secure off site location at least weekly? YES NO

3.7 How often do you monitor the quality of back ups?

Section 4: Policies and Procedures

4.1 In what ways do senior management guide information security policy?

4.2 Is there a current company policy, actively followed, in respect of the following:

	YES	NO	NOT APPLICABLE
Information security			
Employee acceptable use of your systems (including attachments and content) signed by the individual			
Employee password policy			
Obtaining references for new employees			
Website content and structure			
The authorisation of website content and structure			
Disaster recovery plan <i>(If applicable, please attach a copy)</i>			
Concerning how often and who monitors all your websites			
Obtaining the rights to third parties' intellectual property rights (including links to external websites)			
Remote access			
If YES what authentication methods do you use to access these facilities?,			

4.3 Explain your procedures for maintaining and patching your applications.

a) Firewall	
b) Anti-virus software	
c) Applications/ operating systems/ servers/ end users	

4.4 i) How many staff have left the principal Company or any subsidiary for any reason in the last 12 months?

ii) How many of these staff worked in the I.T department?

iii) What procedures are in place to restrict access of those people who have left the Company?

4.5 Does your website inform all users of your terms and conditions of trade?

YES

NO

N/A

4.6 Do you have internal policies covering the use of private data that takes into account both your data protection registrations and the requirements of the relevant data protection legislation in the territories in which you operate.

YES

NO

N/A

Section 5: Claims Experience and Insurance history

5.1 Have you ever disciplined an employee due to malicious computer activity?

YES NO

5.2 Has there been a burglary of office premises within the past three years resulting in the loss of computer equipment?

YES NO

5.3 Regarding the risks to which this proposal relates, **after enquiry**:-

- have any claims or cease and desist orders been made against any of the Companies to be insured, or any of the partners or directors thereof, or
- are you aware of any circumstances which may give rise to a claim against any of the Companies to be insured or any partners or directors thereof, or
- have any of the Companies received any complaint or threat, or are you aware of any circumstance that may give rise to a claim against you that your website infringes a third party's intellectual property (including any trademarks or copyright)?
- have any of the Companies to be insured or any partners or directors thereof suffered any losses, or
- have any partners or directors of the Companies to be insured been found guilty of any criminal, dishonest or fraudulent activity or been investigated by any regulatory body?
- has there ever been an unforeseen outage on your website(s) for more than 3 (three) hours?

YES NO

If the answer to any of questions 5.1, 5.2 or 5.3 is YES then attach full details including an explanation of the background of events, the maximum amount involved/claimed, the status of the claim(s) or circumstance(s) and any reserve(s) or payment(s) made by the Insured and/or by Insurers, and the dates of all developments and payments.

5.4 Current / Expiring Insurances

Please provide details of your current "e-risk" and professional insurances, if applicable.

Insurance	Insurer	Expiry Date	Retroactive Date	Limit	Excess	Premium
E-risk policy						
Professional Indemnity						

DECLARATION

I/we declare that the statements and particulars given above are true and that I/we have not mis-stated or suppressed any material fact. I/we agree that this Proposal Form, together with any other material information supplied by me/us shall form the basis of any contract of insurance effected thereon.

I/we undertake to inform Underwriters of any material alteration to these facts occurring before the completion of the contract. The signatory to this proposal should be a Director of the Insured Company.

Signing of this proposal does not bind the applicant or the insurers to complete the insurance.

Signed:	Full Name
Position held at Insured:	Date