



COMPUTER NETWORK SECURITY/PRIVACY COVERAGE SECTION INFORMATION

Is the Parent Company seeking Computer Network Security/Privacy coverage? Yes No

If yes, please answer the following questions.

Note: Personal information records means all records of any natural person, including the records of clients, customers and employees (see the policy form for the definition of Private Information).

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|---|--|--|
| <p>1. Please check the personal information records that you collect, store, maintain or transmit.</p> | <p>Name/Address
Date of birth
Social security number
Account Number
Credit card information
Financial information
E-mail address
Medical records</p> | |
| <p>2. Are personal information records stored electronically? If “Yes”, proceed to next question. If no, proceed to question 9.</p> | <p>Yes No</p> | |
| <p>3. Please check the computer hardware/software the Company employs to prevent unauthorized access to electronically stored personal information records. If “Other” is checked, please provide details on a separate page.</p> | <p>Firewall
Virus Protection software
Intrusion detection system
Encryption system
Other
None</p> | |
| <p>4. Does the Company maintain a wireless network?</p> <p style="padding-left: 20px;">If “Yes”, is the network encrypted?</p> | <p>Yes No</p> <p>Yes No</p> | |
| <p>5. Is the above computer hardware/software routinely updated?</p> | <p>Yes No</p> | |
| <p>6. Does the Company have a written policy or procedure for destroying hard drives no longer being used by the Company?</p> | <p>Yes No</p> | |
| <p>7. Are electronically stored personal information records backed-up in an internal or external facility or process?</p> <p style="padding-left: 20px;">If “Yes”, please provide the following details.</p> <p style="padding-left: 40px;">a. Back-up records are stored:</p> | <p>Yes No</p> <p>Internally Externally</p> | |

- b. Back-up of records occurs:
- Daily
Weekly
Monthly
Annually
8. Is the back-up of records stored in a secure location? Yes No
9. Please check the security measures the Company employs to prevent unauthorized access to paper/physical personal information records. If "Other" is checked, please provide details.
- Nightly alarm system
Locking system on doors
File cabinet locks
Other
None
10. Is access to personal information records restricted to only those employees who need access to these records in the performance of their employment duties? Yes No
11. Does the Company periodically test the security controls in place to prevent unauthorized access to personal information records? Yes No
12. Are personal information records, electronic or otherwise, allowed to be physically transported to any external location for any purpose other than an external backup of records? Yes No
- If "Yes", please provide the following details.
- a. Does the Company have a policy or process which monitors and identifies those transported records? Yes No
- b. Are any records stored at any time in a laptop computer? Yes No
- c. Are any records stored at any time in a computer owned by an outside vendor other than an external backup of records? Yes No
13. Does the Company have a written Privacy Policy concerning any personal information records? Yes No
- If "Yes", please provide the following details.
- a. Did an outside legal firm develop or review the Privacy Policy? Yes No
- b. Is the Privacy Policy routinely reviewed and updated? Yes No
- c. Is the Privacy Policy compliant with the rules and regulations of all applicable privacy laws? Yes No
14. Please provide the following information.
- a. Approximate number of clients, customers and employees whose personal information records the Company collected, stored, maintained or transmitted during the last 12 months:
- 0 to 50,000
50,001 to 10,000
10,001 to 25,000
25,001 to 50,000
50,001 to 100,000
≥ 100,000

- | | | |
|--|-----|----|
| b. Revenues of the Company for the last 12 months: | \$ | |
| c. Are the revenues of the Company anticipated to increase more than 25% in the next 12 months? If “Yes”, please provide details on a separate sheet of paper. | Yes | No |
15. Within the last 5 years has the Company been subject to or suffered any losses or litigation from any:
- | | | |
|--|-----|----|
| a. Breaches of security? | Yes | No |
| b. Unauthorized acquisition, access, use, identity theft, mysterious disappearance, or disclosure of personal information? | Yes | No |
| c. Violation of any privacy law, rule or regulation? | Yes | No |
| d. Technology or extortion threats? | Yes | No |

If “Yes”, please provide details on a separate sheet of paper.

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR ANOTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME AND SUBJECTS THE PERSON TO CRIMINAL AND [NY: SUBSTANTIAL] CIVIL PENALTIES. (Not applicable in CO, DC, FL, HI, KS, MA, MN, NE, OH, OK, OR, VT or WA; in LA, ME, TN and VA, insurance benefits may also be denied)

IN THE DISTRICT OF COLUMBIA, WARNING: IT IS A CRIME TO PROVIDE FALSE OR MISLEADING INFORMATION TO AN INSURER FOR THE PURPOSE OF DEFRAUDING THE INSURER OR ANY OTHER PERSON. PENALTIES INCLUDE IMPRISONMENT AND/OR FINES. IN ADDITION, AN INSURER MAY DENY INSURANCE BENEFITS, IF FALSE INFORMATION MATERIALLY RELATED TO A CLAIM WAS PROVIDED BY THE APPLICANT.

IN FLORIDA, ANY PERSON WHO KNOWINGLY AND WITH INTENT TO INJURE, DEFRAUD, OR DECEIVE ANY INSURER FILES A STATEMENT OF CLAIM OR AN APPLICATION CONTAINING ANY FALSE, INCOMPLETE, OR MISLEADING INFORMATION IS GUILTY OF A FELONY OF THE THIRD DEGREE.

IN KANSAS, ANY PERSON WHO, KNOWINGLY AND WITH INTENT TO DEFRAUD, PRESENTS, CAUSES TO BE PRESENTED OR PREPARES WITH KNOWLEDGE OR BELIEF THAT IT WILL BE PRESENTED TO OR BY AN INSURER, PURPORTED INSURER, BROKER OR ANY AGENT THEREOF, ANY WRITTEN STATEMENT AS PART OF, OR IN SUPPORT OF, AN APPLICATION FOR THE ISSUANCE OF, OR THE RATING OF AN INSURANCE POLICY FOR PERSONAL OR COMMERCIAL INSURANCE, OR A CLAIM FOR PAYMENT OR OTHER BENEFIT PURSUANT TO AN INSURANCE POLICY FOR COMMERCIAL OR PERSONAL INSURANCE WHICH SUCH PERSON KNOWS TO CONTAIN MATERIALLY FALSE INFORMATION CONCERNING ANY FACT MATERIAL THERETO; OR CONCEALS, FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO COMMITS A FRAUDULENT INSURANCE ACT.

IN MASSACHUSETTS, NEBRASKA, OREGON AND VERMONT, ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR ANOTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING INFORMATION CONCERNING ANY FACT MATERIAL THERETO, MAY BE COMMITTING A FRAUDULENT INSURANCE ACT, WHICH MAY BE A CRIME AND MAY SUBJECT THE PERSON TO CRIMINAL AND CIVIL PENALTIES.

IN WASHINGTON, IT IS A CRIME TO KNOWINGLY PROVIDE FALSE, INCOMPLETE, OR MISLEADING INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING THE COMPANY. PENALTIES INCLUDE IMPRISONMENT, FINES, AND DENIAL OF INSURANCE BENEFITS.