



IMPORTANT NOTE: This is an application for claims-made and reported coverage that includes defense expenses within the limits of coverage. Therefore, 100% of the limits of coverage, and any deductible that applies to defense expenses, may be used up with the payment of judgments, settlements, or defense expense.

Name of Applicant Proposed Effective Date

INSURANCE COVERAGE AND LIMITS

- 1. Each wrongful act limit / total limit requested:
2. Deductible/Retention requested:
3. Retroactive Date requested:
4. Do you currently carry network and information security liability or communications and media liability coverage?...
5. Prior coverage information:

WEBSITE CONTENT AND ACTIVITIES, SERVICES AND OPERATIONS ON THE INTERNET

6. List your website address(es), including those you control:

Table with 3 columns: Activity, Current, Within 1 Year. Rows include: Informational access, Citizen or customer complaint, View account balances, Web-based payments, Registration for classes, On-line learning, Bulletin boards, E-commerce, Internet service provider, Website design, Website hosting, Software development, Data processing, Network security, Other.

8. Please indicate the principal market(s) for your Internet activities, services or operations:

9. Does your website contain, disseminate, employ or allow any of the following?

Please check all that apply and provide a brief description.

Description

- Health or medical information
- Self-help or self-improvement Information
- Interactive gaming or games of chance
- Sweepstakes or coupons
- How-to or technical manuals
- Professional services
- Executable programs or shareware; software downloads

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10. How many of your citizens or customers currently use/access your website.....  
 What percentage of your total citizens or customers use/access your website? .....

**CONTRACTORS AND VENDORS**

11. Do you contract with any subcontractor(s), independent contractor(s) or third-party vendor(s) for Internet activities, services or operations? .....  Yes  No

If yes, describe all such contracts, including type of activity, service or operation contracted, and the contractor/vendor(s): \_\_\_\_\_

Do the contracts for the above activities, services or operations address the following:

- a. Provide you with idemnification for the contractor/vendor's misconduct, errors, omissions and negligence? ....  Yes  No
- b. Identify the contractor/vendor's responsibility for safeguarding private, sensitive or confidential information?...  Yes  No
- c. Identify the security measures that the contractor/vendor will provide or follow? .....  Yes  No
- d. Grant you ownership of intellectual property rights and business or operational methods incorporated into any work for hire performed for you or on your behalf? .....  Yes  No

**NETWORK AND INFORMATION SECURITY POLICIES AND PROCEDURES**

12. Do you have a written information security policy? .....  Yes  No  
 If yes, do you have written procedures governing how changes are made to such policy? .....  Yes  No

13. Do you have a policy or procedure for the secure care, handling and storage of private, sensitive or confidential information on portable communication devices?.....  Yes  No

14. Do you post a privacy disclosure statement on your website? .....  Yes  No

15. Do you post a terms of use statement on your website that requires acceptance by users or customers? .....  Yes  No

16. How often do you perform audits to ensure compliance with your privacy policies?  
 annually  bi-annually  never  other: \_\_\_\_\_

17. Are your employees required to sign an Internet usage policy or statement? .....  Yes  No  
 If yes, do you require annual (or more frequent) review of those policies or statements? .....  Yes  No

18. Do you collect or store user-specific, private, sensitive or confidential information through your website? .....  Yes  No  
 If yes, do you share this information with, or sell to, outside parties? .....  Yes  No  
 If yes, please describe that information and with whom it is shared: \_\_\_\_\_

19. Do you collect data about children who use your website? .....  Yes  No  
 If yes, describe the method you use to obtain parental permission: \_\_\_\_\_

20. Is user-specific, private, sensitive or confidential information stored on your server(s) and portable communication devices (e.g., laptops, PDA's) encrypted?.....  Yes  No

21. At which point(s) do you run anti-virus software?  
 desktops/laptops  network gateways  mail servers  file servers  other: \_\_\_\_\_  
 How often and by what method are virus signatures updated?: \_\_\_\_\_

Please provide other relevant information describing your computer virus management practices (e.g., virus screening performed by a third party): \_\_\_\_\_

22. Do you have formal procedures in place to report and respond to unauthorized attempts to access your computer systems? .....  Yes  No
23. Do you maintain computer network logs and generate exception reports to monitor:
- unacceptable or restricted transactions? .....  Yes  No
  - correcting or reversing entries? .....  Yes  No
  - unsuccessful attempts to access restricted information on the site? .....  Yes  No
24. Safeguards: Please check all that apply, identifying who provides or maintains the safeguard:
- Intrusion detection software .....  You  Vendor  No safeguard
  - Vulnerability or penetration testing .....  You  Vendor  No safeguard
  - Backup and recovery processes .....  You  Vendor  No safeguard
25. Please describe your policies and procedures for identifying computer system vulnerabilities and obtaining remedial software patches: \_\_\_\_\_
26. Do you have a firewall installed and configured to protect your network? .....  Yes  No  
If yes, is there a firewall administrator accountable for maintaining this firewall? .....  Yes  No
27. Do you use a secure area of your website to conduct transactions? .....  Yes  No
28. Is a login ID and password (authentication) required to access secure areas of your website? .....  Yes  No  
Do the secure areas of your website begin with **https://** .....  Yes  No
29. If your website or communications network were disabled, what is the worst case scenario to authorized users who access your website or communications network? \_\_\_\_\_

**COMMUNICATIONS AND MEDIA POLICIES AND PROCEDURES**

30. Did you or your legal counsel conduct an analysis to determine that any domain name you use does not infringe on the intellectual property rights of a third party? .....  Yes  No
31. Do you have a formal procedure for editing or removing controversial, offensive or infringing content from material distributed, broadcast or published by you or someone on your behalf? .....  Yes  No  
If yes, please describe: \_\_\_\_\_
32. Do you use the material of others (e.g., text, video, graphics, photos or music) in your website? .....  Yes  No  
Do you use the material of others in websites you design or develop for others? .....  Yes  No  Not applicable  
If yes to either of the above, have you obtained the rights to use this material? .....  Yes  No
33. Do you link to other websites outside of your own? .....  Yes  No  
Do you frame around the material of websites outside of your own? .....  Yes  No  
If yes, to either of the above, have you obtained written permission to do so? .....  Yes  No
34. Is there a distinction or warning when users enter an external website from your website? .....  Yes  No  Not applicable
35. Are internal audit controls in place to ensure that intellectual property rights are being properly secured and that due diligence procedures are being followed? .....  Yes  No  
If yes, how often? \_\_\_\_\_  
If no, please explain what due diligence procedures are in place: \_\_\_\_\_
36. Are employees required to sign a statement that they will not use previous employers' or clients' intellectual property? .....  Yes  No

37. Does your website, or any website you manage for others, include chatrooms, bulletin boards or blogs? .....  Yes  No  
*If yes, do you have a formal policy for monitoring, editing or placing comments on these areas? .....*  Yes  No  
*If yes, is your policy clearly disclosed to chatroom, bulletin board or blog users? .....*  Yes  No  
 Please describe your procedures for ensuring compliance with the above policy: \_\_\_\_\_

**LOSS HISTORY**

38. Within the past five years has there been, or is there now pending, any complaint, demand for monetary damages or any civil proceeding, including arbitration, seeking monetary damages or injunctive relief against you or any other entity or person proposed for this insurance (whether or not reported to an insurer) pertaining to:

- a. Failure to prevent the transmission of a computer virus? .....  Yes  No
- b. Failure to provide authorized users of your website, computer or communications network with access? .....  Yes  No
- c. Failure to protect the private or confidential information of others? .....  Yes  No
- d. Failure to prevent the transmission of a computer virus? .....  Yes  No
- e. Infringement of copyright, title, slogan, trademark, trade name, trade dress, service mark or service name? ...  Yes  No
- f. Plagiarism or unauthorized use of material of others? .....  Yes  No

*If yes to any, attach full details, including the date, a brief description, and the damages or injunctive relief sought or settlement paid, of such claim or suit, and the current status if pending.*

39. Do you or any other entity or person proposed for this insurance have any knowledge or information of any fact, circumstance or situation which could reasonably give rise to a claim or suit that would fall within the scope of the proposed insurance? .....  Yes  No  
*If yes, attach full details.*

Name of Applicant:	
Signature of Authorized Representative:	
Date Signed:	Title:

## FRAUD STATEMENT

Please read the statement applicable to your state, and the final statement. Then sign, date and return with your application.

**ALASKA:** A person who knowingly and with intent to injure, defraud, or deceive an insurance company files a claim containing false, incomplete, or misleading information may be prosecuted under state law.

**ARKANSAS:** Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

**CALIFORNIA:** For your protection California law requires the following to appear on this form. Any person who knowingly presents false or fraudulent claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

**COLORADO:** It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance, and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado division of insurance within the department of regulatory agencies.

**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.

**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.

**HAWAII:** For your protection, Hawaii law requires you to be informed that presenting a fraudulent claim for payment of a loss or benefit is a crime punishable by fines or imprisonment, or both.

**KENTUCKY:** Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance 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.

**LOUISIANA:** Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

**MAINE:** It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties may include imprisonment, fines or a denial of insurance benefits.

**MASSACHUSETTS: NOTICE:** If you or someone else on your behalf gives us false, deceptive, misleading, or incomplete information that increases our risk of loss, we may refuse to pay claims under any or all of the Optional Insurance Parts and we may cancel your policy. Such information includes the description and the place of garaging of the vehicle(s) to be insured, the names of operators required to be listed and the answers to questions in this application about all listed operators. Check to make certain that you have correctly listed all operators and the completeness of their previous driving records. The Merit Rating Board may verify the accuracy of the previous driving records of all listed operators, including that of the applicant for this insurance.

**MINNESOTA:** A PERSON WHO SUBMITS AN APPLICATION OR FILES A CLAIM WITH INTENT TO DEFRAUD OR HELPS COMMIT A FRAUD AGAINST AN INSURER IS GUILTY OF A CRIME.

**NEW JERSEY FOR AUTO:** Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties. **FOR WC:** I UNDERSTAND THAT ANY INTENTIONAL FALSE OR MISLEADING INFORMATION CONCERNING ANY FACT IN THIS APPLICATION MAY SUBJECT ME TO PENALTIES AS ARE PROVIDED BY LAW.

**NEW MEXICO:** ANY PERSON WHO KNOWINGLY PRESENTS A FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT OR KNOWINGLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE IS GUILTY OF A CRIME AND MAY BE SUBJECT TO CIVIL FINES AND CRIMINAL PENALTIES.

**NEW YORK FOR AUTO:** ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR COMMERCIAL INSURANCE OR A STATEMENT OF CLAIM FOR ANY COMMERCIAL OR PERSONAL INSURANCE BENEFITS CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO, AND ANY PERSON WHO IN CONNECTION WITH SUCH APPLICATION OR CLAIM, KNOWINGLY MAKES OR KNOWINGLY ASSISTS, ABETS, SOLICITS OR CONSPIRES WITH ANOTHER TO MAKE A FALSE REPORT OF THE THEFT, DESTRUCTION, DAMAGE OR CONVERSION OF ANY MOTOR VEHICLE TO A LAW ENFORCEMENT AGENCY, THE DEPARTMENT OF MOTOR VEHICLES OR AN INSURANCE COMPANY, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME, AND SHALL ALSO BE SUBJECT TO A CIVIL PENALTY NOT TO EXCEED FIVE THOUSAND DOLLARS AND THE VALUE OF THE SUBJECT MOTOR VEHICLE OR STATED CLAIM FOR EACH VIOLATION. **FOR ALL OTHER:** Any person who knowingly and with intent to defraud any insurance company or other 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 shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

**OHIO:** ANY PERSON WHO, WITH INTENT TO DEFRAUD OR KNOWING THAT HE IS FACILITATING A FRAUD AGAINST AN INSURER, SUBMITS AN APPLICATION OR FILES A CLAIM CONTAINING A FALSE OR DECEPTIVE STATEMENT IS GUILTY OF INSURANCE FRAUD.

**OKLAHOMA:** WARNING: Any person who knowingly, and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony.

**OREGON:** Any person who knowingly and with intent to defraud or solicit another to defraud the insurer by submitting an application containing a false statement as to any material fact, may be violating state law.

**PENNSYLVANIA:** ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER 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 CIVIL PENALTIES.

**RHODE ISLAND:** *In Rhode Island this question must be answered by any applicant for property insurance. Failure to disclose the existence of an arson conviction is a misdemeanor punishable by a sentence of up to one year of imprisonment.*  
DURING THE LAST TEN YEARS, HAS ANY APPLICANT BEEN CONVICTED OF ANY DEGREE OF THE CRIME OF ARSON?  
 YES  NO

**TENNESSEE FOR WC:** It is a crime to knowingly provide false, incomplete or misleading information to any party to a workers' compensation transaction for the purpose of committing fraud. Penalties include imprisonment, fines and denial of insurance benefits.

**FOR ALL OTHER:** 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.

**UTAH FOR WC:** Any person who knowingly presents false or fraudulent underwriting information, files or causes to be filed a false or fraudulent claim for disability compensation or medical benefits, or submits a false or fraudulent report or billing for health care fees or other professional services is guilty of a crime and may be subject to fines and confinement in state prison.

**VERMONT:** Any person who knowingly and with intent to defraud any insurance company or another person files an application for insurance containing any materially false information or conceals for the purpose of misleading information concerning any fact material thereto, may be committing a crime, subjecting the person to criminal and civil penalties.

**VIRGINIA:** 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.

**WEST VIRGINIA:** Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

**ALL OTHER STATES:** Any person who knowingly and with intent to defraud any insurance company or another person files an application for insurance 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 civil penalties. Not applicable in Nebraska.

Applicant's Signature	Date
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Agent/Broker Name	Agent/Broker License No.	Date
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## Important Notice Regarding Compensation Disclosure

For information about how Travelers compensates independent agents, brokers, or other insurance producers, please visit this website:

[http://www.travelers.com/w3c/legal/Producer\\_Compensation\\_Disclosure.html](http://www.travelers.com/w3c/legal/Producer_Compensation_Disclosure.html)

If you prefer, you can call the following toll-free number: 1-866-904-8348. Or you can write to us at Travelers, Enterprise Development, One Tower Square, Hartford, CT 06183.