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| **CYBER RISKS ALL OPERATIONS UNDER $15MM ANNUAL REVENUES** – APPLICATION FOR INSURANCE  For risks over $15MM annual revenues – please login to JET and complete online application. |

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| The following underwriting information has been provided by you or on your behalf. It is understood that the Insurer(s) has relied upon this information for risk acceptance to provide quote and coverage acceptability. Any misrepresentation or omission will render an insurance policy null and void from inception. **PLEASE READ CAREFULLY.** |

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| **APPLICANT INFORMATION** |  |
| Applicant’s Email Address for E-Signature\*: |  |
| Applicant(s): |  |
| Province of Primary Risk Location: |  |
| Website: |  |
| Is the applicant domiciled in Canada? | Yes  No - terms cannot be provided for non-Canadian firms. Please do not proceed. |
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| **INDUSTRY GROUP** | |  | | |
| Please indicate the industries the Applicant is involved in: | | | | |
|  | Accountants | |  | Healthcare Services |
|  | Agriculture and Mining | |  | Hotel, Food & Beverage, Entertainment |
|  | Aviation | |  | Information Technology |
|  | Construction and Contractors | |  | Legal |
|  | Education | |  | Manufacturing |
|  | Electronic Games | |  | Marine |
|  | Financial Services and Institutions | |  | Misc. Professional Services |
|  | Gambling | |  | Power generation & Utilities |
|  | Public Institutions, Councils, Municipalities | |  | Transport/Logistics |
|  | Real Estate | |  | TV, Broadcasting, Publishing, Music, Creative Arts, Advertising |
|  | Religious Organizations | |  | Wholesale/Distribution |
|  | Retail (excluding online sales) | |  | Other |
|  | Retail (excluding online sales) | |  |  |

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| **ESTIMATED TOTAL GROSS REVENUES NEXT 12 MONTHS - BY REGION** | | | |
| Estimated revenue from Canada: | | $ |  |
| Estimated revenue from USA: | | $ |  |
| Estimated revenue from other countries (outside CAN + USA) | | $ |  |
| If Other please describe, please list countries: |  | | |

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| **RISK INFORMATION** | |
| Business Operations (UNDECLARED OPERATIONS WILL NOT BE COVERED UNDER A POLICY IF ISSUED): | |
| Accountant  Adult Entertainment  Advertising and Marketing Agency  Agriculture and Fishing  Amusement Parks and Centres Operation  Architect  Aviation  Baker  Building Completion Services (Plastering, Carpentry, Tiling and Carpeting, Painting and Decorating, Glazing)  Building Installation Services (Plumbing, Electrical, Air Conditioning, Heating, Fire & Security Alarm)  Building Structure Services (Concreting, Bricklaying, Roofing, Structural Steel Erection)  Cafes, Pubs and Restaurants  Car Repairs / Sales / Services  Charity  Chartered Surveyors  Childcare / Early Learning  Civil Engineering  Computer Games Designers and Manufacturers  Construction Services  Corporate Adviser  Councils / Municipalities  Creative Artists, Musicians, Writers and Performers  Data Aggregators/Analytics/Processor/Hoster  Earthmoving Services  Education  Farming  Fashion Designer  Film and Photography Company  Finance Broker  Financial Consultant  Financial Platform Provider  Food & Drink Production  Foreign Exchange  Fund Administrator  Gambling  Gaming (on line)  Graphic Designer  Health and Fitness Centre  Heavy and Civil Engineering Construction  Hospital  Hospitality  Insurance Broker  Insurance Underwriter  Interior Designer  Investment Advisor / Introducer  Investment Manager | Investment Trading Platform Provider  Lawyer / Legal Advisors  Libraries and Archives  Libraries and Archives  Logging  Management Consultancy  Manufacturing  Manufacturing (DNC / networked)  Marine  Medical Centre  Medical Professional  Mortgage Broker  Museum Operation  Nature Reserves and Conservation Parks Operation  Newspaper  Non-Residential Property Operator  Notary Public  Office Administrative Services  Online Retail seller  Other Construction Services  Other Goods and Equipment Rental and Hiring  Paralegal  Performing Arts Operation  Plant Machinery Hire  Power Generation and Utilities  Public Relations  Publishing  Quantity Surveyor  Radiologist  Real Estate Fund Manager  Real Estate Services  Recruitment Agent  Religious Services  Rental and Hiring of Goods and Equipment  Residential and Commercial Construction  Retail Shop  Sports and Physical Recreation  T.V. and Broadcasting  Tax Agent  Technology and Telecommunications  Trade Association  Transporting, Logistics and Warehousing  Travel Agency and Tour Arrangement Services  Trust Administration  Utilities  Venture Capitalist / Vehicle  Waste Management  Wholesaling |

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| **SYSTEMS INFORMATION** | | | | | | | | | | | | | | | | | | |
| Are all external gateways of the Applicant’s network protected by an active business grade firewall and business grade antivirus across their entire network including servers and endpoints (commercial/business grade means Antivirus and Firewall protection which is suitable for businesses only, not for households/consumer use)? | | | | | | | | | | | | | | | | | Yes  No\* | |
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|  | | \*If no, the Applicant hereby attests that the Avast solution as provided in the quote document will be installed and implemented on all of the Applicant’s systems within 30 days of any issuance of coverage. Further, it is hereby understood and agreed that if the install and implementation does not take place within the 30 day period, coverage will be null and void. | | | | | | | | | | | | | | | Yes  No | |
|  | |  | | | | | | | | | | | | | | |  | |
| Is all data that is necessary to run the Applicant’s business backed-up by them or their cloud-service provider at least every 7 days? | | | | | | | | | | | | | | | | | Yes  No\* | |
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|  | | \*If no, the Applicant hereby attests that the Avast solution as provided in the quote document will be installed and implemented on all of the Applicant’s systems within 30 days of any issuance of coverage. Further, it is hereby understood and agreed that if the install and implementation does not take place within the 30 day period, coverage will be null and void. | | | | | | | | | | | | | | | Yes  No | |
|  | |  | | | | | | | | | | | | | | |  | |
| Is all critical data backed-up to an environment which is completely separate from the Applicant’s network, and tested for integrity at least every 180 days? | | | | | | | | | | | | | | | | | Yes  No | |
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| Are critical patches installed within 30 days of release? | | | | | | | | | | | | | | | | | Yes  No | |
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| Is the Applicant PCI-DSS (Payment Card Industry – Data Security Standard) compliant, if applicable? | | | | | | | | | | | | | | | Yes  No  N/A | | | |
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| Does the Applicant password protect all portable media including smartphones and memory sticks? | | | | | | | | | | | | | | | | | Yes  No\* | |
|  | | \*If no, the Applicant understands that all losses resulting from portable media is excluded absolutely if they are not password protected – please confirm you understand and agree to this coverage limitation. | | | | | | | | | | | | | | | Yes  No | |
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| **LOSS EXPERIENCE** | | | | | | | | | | | | | | | | | | |
| Has the Applicant had any incidents (claims or otherwise) in the last three years? | | | | | | | | | | | | Yes\*  No | | | | | | |
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|  | | \*If yes, please provide details (date, paid, etc.): | | | | | | | |  | | | | | | | | |
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| Is the Applicant aware of any circumstances that may result in a Demand, or may give rise to a claim? | | | | | | | | | | | | | | | |  | | |
|  | | | | | | | | Yes, describe: | | |  | | | | | | | |
|  | | | | | | | | No | | |  | | | | | | | |
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| **PRIOR INSURANCE** | | | | | | | | | | | | | | | | | | |
| Does the Applicant currently carry Cyber coverage? | | | | | | | | Yes  No | | | | | | | | | | |
| Insurer: |  | | | Expiring Premium: | | | $ | | Policy Number: | | | |  | Retroactive Date: | | |  |  |
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| Has the Applicant ever had Cyber insurance cancelled, declined or refused? | | | | | | | | | | | | | Yes  No | | | | | |
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|  | | | If yes, please describe: | | |  | | | | | | | | | | | | |
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| **COVERAGES** | | | | | | | | | |
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| **Limits** | | | | | | | | | |
| Cyber Risk: | $60,000 | $100,000 | $250,000 | | $500,000 | | $1,000,000 | $2,000,000 | |
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| Does the Applicant require Crime/Funds Transfer Fraud coverage? | | | | | Yes\*  No | | | | |
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|  | \*If yes, does the Applicant have a written procedure for fund and wire transfers with respects to the validating of all changes to supplier/vendor/client/customer contact details and bank account details? | | | | | | | | Yes\*  No |
|  |  | | | | | | | |  |
|  | \*If yes, does the Applicants’ written procedure require validation of the contact details and bank account information (including account numbers) first in writing, and then followed with oral confirmation directly from the supplier/vendor/client/customer, prior to establishing the payees (supplier/vendor/customer) record and prior to making any changes? | | | | | | | | Yes\*  No |
|  |  | | | | | | | |  |
|  | \*If yes, does the Applicant always follow the written procedure? | | | | | | | | Yes\*  No |
|  |  | | | | | | | |  |
|  | \*If yes: Crime – Funds Transfer Fraud | | | $25,000 | $50,000 | $100,000 | | $250,000 | |

**Note**: If a quote is extended, the limit for Crime-Funds Transfer Fraud shown on the quotation is the maximum limit available and may not match the limit requested. Please review your quote carefully.

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| **PLEASE READ BEFORE SIGNING:** The Applicant has reviewed this application form and all attachments and acknowledges that all information provided is true. The Applicant understands that any insurance that may be provided is based on the information in this application being true and correct, and any misrepresentation or omission will render any such insurance policy null or void from inception.  The Applicant understands that if the Insured fails to inform the Insurer of material changes to these facts during the term of an insurance policy, the insurance may not be valid. The Applicant understands that they cannot contravene a term of the policy, commit a fraud, or willfully make false statements during a claim investigation.  The Applicant confirms that all individuals included in this application have authorized the collection and storage of their personal information. Credit information, claims history and other personal information may be collected, used and disclosed for the purposes of assessing and underwriting the application for insurance, renewals, evaluating claims, detecting and preventing fraud.  **NOTE: INSURANCE IS NOT IN EFFECT UNTIL SUCH TIME AT FORWARD INSURANCE MANAGERS LTD. HAS ISSUED A BINDER OR INSURANCE POLICY IN WRITING THAT CONFIRMS COVERAGE IS IN PLACE.**  Forward Insurance Managers Ltd is a managing underwriting agency duly licensed as an intermediary across Canada – and the insurance company at risk shall be duly listed on any quotation, binder or insurance policy.  The Applicant hereby consents to the use of electronic communications, electronic records, and electronic signatures. The Applicant understands an electronic signature is legally binding, just as if the Applicant had signed a paper document. |

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| **Signature of Applicant(s):** |  | **Date:** |  |
| **Brokerage:** |  | **Broker ID#:** |  |
| **Broker Email:** |  | **Phone:** |  |

**Email completed apps to newcommercial@forwardinsurance.ca or for the quickest turnaround, log in to *JET*.**