



Beazley MediaTech

Renewal Application

THIS APPLICATION IS FOR A CLAIMS MADE POLICY:

Please fully answer all questions and submit all requested information. If alternative limits are required for E&O or CGL, please advise the underwriter when submitting.

GENERAL INFORMATION:

Name of Organization or Legal Entity (Applicant) including any subsidiaries:

Mailing Address:

Province:

City:

Postal Code:

of Employees:

Website URL(s):

Authorized Officer ¹:

Email:

Telephone:

Breach Response Contact ²:

Email:

Telephone:

Business Description:

Does the Applicant provide data processing, storage or hosting services to third parties?

Yes

No

REVENUE INFORMATION:

Please provide Gross Revenue information

	Past Twelve Months:	Next Year (Estimate)
CND Revenue:	CND	CND
Non-CND Revenue:	CND	CND
Total:	CND	CND

What percentage of the Applicant's revenues is business to business? %

Direct to consumer? %

If 'Yes', please explain:

Has the Applicant within the past twelve (12) months completed or agreed to, or does it contemplate entering into within the next twelve (12) months, a merger, acquisition, consolidation, whether or not such transactions were or will be completed?

Yes

No

If 'Yes', please explain:

¹ This is the officer of the Applicant that is authorized make statements to the Underwriters on the Applicant's behalf and to receive notices from the Insurer or its authorized representative(s).

² This is the employee of the Applicant that is designated to work with the insurer in response to a data breach event.

PRODUCT & SERVICE ENGAGEMENTS

Has there been any material change in:

The nature and types of professional and/or technology services the Applicant is engaged in?

Yes No

The contract used by the Applicant for product & service engagements?

Yes No

The types of Technology Products developed, manufactured, licensed or sold by the Applicant?

Yes No

Does the Applicant wish to have any additional services covered?

Yes No

If 'Yes' to any of the above, please explain:

PAYMENT CARDS, COMPUTER & NETWORK SECURITY AND BUSINESS CONTINUITY

Does the Applicant accept payment cards for goods sold or services rendered?

Yes No

If 'Yes', is the Applicant compliant with applicable data security standards issued by financial institutions the Applicant transacts business with (e.g. PCI standards)?

Yes No

Confirmation that all employees, including owners, have security awareness training on recognizing common cybercrime and information security risks, including social engineering, online fraud, phishing and web-browsing risks, on at least an annual basis.

Yes No

Confirmation that the Applicant implements critical patches and updates systems as soon as possible when updates and patches become available, and do not use any end-of-life/unsupported software.

Yes No

Confirmation that the Applicant has a disconnected, off-site back-up for all data that is required for mission-critical or revenue-generating purposes and is backed up at least daily.

Yes No

Confirmation that the Applicant tests the integrity of back-up data on a regular basis.

Yes No

Confirmation that the Applicant uses MFA (Multi-factor Authentication) for email account access and for all remote access to the network.

Yes No

Confirmation that the Applicant does not allow remote access into the environment without a VPN (Virtual Private Network).

Yes No

Confirmation that the Applicant scans incoming emails for malicious attachments and/or links.

Yes No

Confirmation that the Applicant protects all of devices with anti-virus, anti-malware, and/or endpoint protection software.

Yes No

eCRIME

Have there been any changes since the prior Application (or information and materials submitted in connection therewith) in the processes or procedures relating to the disbursement of funds, changes to account information, or to the configuration of telecommunications systems?

Yes No

If 'Yes', please explain: _____

PRIOR CLAIMS AND CIRCUMSTANCES

In the last (5) five years, has the Company, its partners, directors, officers or employees ever had a written demand or civil proceeding for the compensatory damages made against them?

Yes No

If 'Yes', please provide details:

During the last five years, has the Applicant:

i) Received any claims or complaints with respect to privacy, breach of information or network security, or unauthorized disclosure of information?

Yes No

ii) Been subject to any government action, investigation or subpoena regarding any alleged violation of a privacy law or regulation?

Yes No

iii) Received a complaint or cease and desist demand alleging trademark, copyright, invasion of privacy, or defamation with regard to any content published, displayed or distributed by or on behalf of the Applicant?

Yes No

iv) Notified consumers or any other third party of a data breach incident involving the Applicant?

Yes No

v) Experienced an actual or attempted extortion demand with respect to it's computer systems?

Yes No

vi) Experienced an unexpected outage of a computer network, application or system lasting greater than four (4) hours?

Yes No

If 'Yes' to any of the above, please provide details regarding such incidents(s) or event(s):

NOTICE CONCERNING PERSONAL INFORMATION

By purchasing insurance from Beazley Canada Limited, a customer provides Beazley with his or her consent to the collection, use and disclosure of personal information, including that previously collected, for the following purposes:

- The communication with underwriters;
- The detection and prevention of fraud;
- The underwriting of policies;
- The analysis of business results;
- The evaluation of claims;
- Purposes required or authorized by law

For the purposes identified above, personal information may be disclosed to Beazley's related or affiliated companies and service providers.

Further information about Beazley's personal information protection policy may be obtained by contacting their privacy officer at 416-601-2155.

WARRANTY STATEMENT

THE UNDERSIGNED WARRANTS THAT TO THE BEST OF THEIR KNOWLEDGE, THE STATEMENTS SET FORTH IN THIS APPLICATION ARE TRUE. THE UNDERSIGNED ALSO WARRANTS THAT THEY HAVE NOT SUPPRESSED OR MISSTATED ANY MATERIAL FACT.

IF THE INFORMATION PROVIDED IN THIS APPLICATION SHOULD CHANGE BETWEEN THE DATE OF THE APPLICATION AND THE EFFECTIVE DATE OF THE POLICY, THE UNDERSIGNED WARRANTS THAT THEY WILL IMMEDIATELY REPORT SUCH CHANGES TO THE INSURER.

SIGNING THIS APPLICATION DOES NOT BIND THE UNDERSIGNED TO PURCHASE THIS INSURANCE, NOR DOES IT BIND THE INSURER TO ISSUE THIS INSURANCE. HOWEVER, SHOULD THE INSURER ISSUE A POLICY, THIS APPLICATION SHALL SERVE AS THE BASIS OF SUCH POLICY AND WILL BE ATTACHED TO AND FORM PART THEREOF.

Signed: _____
(Authorized Representative)

Date: _____

Print Name: _____

Title: _____