



**Company Details**

Name of the insured

Subsidiaries

Location (list all countries you operate in)

Company registration no. (CVR nr.)

Industry

Link to company website (if available)

Address

Postal code

City

**Financial**

Revenue

Financial year	EU/EES	USA/Canada	Rest of world	Total

Please provide revenue split per subsidiary

Out of total revenue, online sales make up? (estimate)

**Security protocols**

How often does the company backup business critical data?

How does the company store the back up?

Is the backup held by a third party or the company itself? Where is the backup kept?

What security software is installed on the IT-system/network? Inhouse or externally. Please describe:

			If yes please name
Firewall	Yes	No	
Antivirus	Yes	No	
Application	Yes	No	
Whitelisting	Yes	No	
Email Spamfilter	Yes	No	
Secure DNS	Yes	No	
Other please describe,			

Are above mentioned security software commercially used and regularly patched?

Yes No

Does the company perform network/web scans to identify and remedy vulnerabilities?  
If yes, internally performed or by 3rd party vendor? Frequency? Yes No

Does the company perform penetration tests to identify and remedy vulnerabilities?  
If yes, internally performed or by 3rd party vendor? Frequency? Yes No

When will patches be applied to the operating system of all pc's/servers  
(approximate number of days from the release date of the patch)?

Do you use legacy systems?  
If yes will those be patched/updated to fix security vulnerabilities etc.? Yes No

Do you use embedded systems (e.g. software built into a device that controls the device)?  
If yes will those be patched/updated to fix security vulnerabilities etc.? Yes No

**Credit/Debet card payments**

Does the company accept payment cards? (visa, mastercard, Amex, JCB etc.)  
If NO move on to *Claims History*. Yes No

Is the company PCI-DSS Compliant? Please note that even if this process is outsourced the insured still  
need to be compliant (please submit valid AOC) Yes No

Is 3D Secure, VerifiedByVisa, J/Secure, American Express Safekey etc. used for each and every transaction? Yes No

Please indicate PCI level I/A. Level 1-5

**Claims History**

Has the company had any cyber incidents or network breakdowns, liability claims or unintended disclosure  
of personal identifiable information or confidential company data in the last 3 years? (e.g. DDoS, data leak,  
ransomware, system breakdown) Yes (more than one incident) No . If No move on to *Encryption*.

If yes please elaborate on the event:

When?	
What happened?	
No. Of users/networks/applications affected?	
Outage time?	

Was ransom paid? Yes No

Financial losses incurred? (give amount) Yes No

What measures have been taken to mitigate the risk?

Insurance claim incurred?	Yes	No
PCI Claim?	Yes	No
Has the company been met with, or paid out on any media liability claim in the last 3 years? If yes please elaborate	Yes	No

**Encryption**

Does the insured business secure remote access to network and data (SSL, IPsec, SSH, VPN etc.)?	Yes	No
If the insured has a guest network is this isolated and separated from all other networks?	Yes	No
To what extent does the company encrypt mobile devices, e.g. bitlocker (laptops, tablets, mobilephones, USBs)?		

**User account management**

Does the insured business have an IT-security policy in place and is it distributed to all employees?	Yes	No
Does the company have a policy for auditing managing computer and user accounts and ensuring that user accounts are shut down when employment is terminated?	Yes	No
Does the company require passwords to be changed periodically and set min. requirements to strength?	Yes	No
Do employees have access to private external email accounts and social media within the company network?	Yes	No
Do employees have downloading and installation rights of other than specifically business relevant and approved software?	Yes	No
Do consultants receive user rights restricted to a minimum/designated purpose?	Yes	No
Do employees receive user rights restricted to a minimum/designated purpose?	Yes	No

**Disaster Recovery Plan/Business Continuity Plan**

Does the company have a Disaster Recovery Plan that takes into account Cyber perils (cyber attack, system breakdown and other serious network security events)? (contingency/restore planer)	Yes	No
Has the plan been tested and deemed effective?	Yes	No
Does the company have a Business Continuity Plan that takes into account Cyber perils (cyber attack, system breakdown and other serious network security events)?	Yes	No
Has the plan been tested and deemed effective?	Yes	No
Has the DRP and BCP plan been signed off by top management?	Yes	No

**Outsourcing**

Does the company outsource any critical systems/applications (listed below) to thirds parties? If so, whom?

			If YES, name external provider
Hosting of apps or data	Yes	No	
Managed Security	Yes	No	
Point of Sale?/payment solution	Yes	No	
Back up/storage area network	Yes	No	

**Privacy**

Does the insured store or process more than 50, 000 PII records?

Yes No

If NO move on to *Business Interruption*

*\*\*A data record is a set of data on an identifiable individual (living or deceased). 1 piece of information is a 'data field'. These are what make up a data record.*

If Yes, please provide details of personal information

	Social security numbers	HR(employees)	Health records	Person sensitive data	Bank account/Financial information	Credit/Debit Card information (in store)	Credit/Debit Card information (online)	Other (please specify)
Number of records transmitted or processed per year								
Maximum number of records stored on your network at any one time								
Encrypted while at-rest on the network?	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
Encrypted while in-transit within and out of the network	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
Encrypted on mobile devices?	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
Encrypted on portable data storage media?	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
Encrypted on back-up tapes	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
Estimated % of above records stored/ processed in USA								

Is access to person sensitive data restricted?

Yes No

Does the company have a DPO?

Yes No

Does the company have a process for purging data?

Yes No

**Business Interruption**

Do all insured companies/locations/sites run on the same infrastructure and systems or do they run independently of each other, i.e. if one location/site is affected will others be able to work? Yes No  
Please elaborate

Are there any manual processes or emergency stock piles the client can put into effect to mitigate BI losses? Yes No  
Please elaborate

Network Dependency - After how long will your business financially be impacted by a loss to your site/systems?

**Manufacturing (If applicable)**

Does the company have remotely controlled manufacturing production or machinery connected to a network (eg. CNCs or PLCs etc.)? Yes No

If yes, We want to assure that the manufacturing production environment is separate from all other networks and ideally the production itself is segmented for example by using VLAN or air gapping.  
Please elaborate on how the production is secured

Can the remote control mechanism be overridden manually, in the event of the remote are not working? Yes No

Can production/machinery connect to the internet or other networks? Yes No

Can the production be accessed remotely? Yes No

If yes, is remote access secure? Eg. Ipsec, vpn etc

Is remote access user rights operator or administrator ?

Is access to production (network) environment limited to specific employees? Yes No

What measures are in place to limit risk of unauthorized access or transfer of malware to production environment?

Is business critical Scada systems /data backed up? Yes No

If possible, please submit high level drawings of the security setup.

Please confirm that the risk information given and security standards are applicable to all insured companies and locations/sites.

Yes      No

If not please elaborate on any relevant information, particularly where the standards fall below what has been submitted?

**Declaration**

I declare that I have made all necessary inquiries into the accuracy of the responses given in this proposal and confirm that the statements and particulars given in this proposal are true and complete and that no material facts have been omitted, misstated or suppressed. I agree that should any of the information given by me alter between the date of this proposal and the inception date of the insurance to which this proposal relates, I will give immediate notice thereof to the insurer.

I acknowledge receipt of the notices included in the cover sheet of this proposal and that I have read and understood the content of them.

I confirm that I am authorised by the proposing policyholder (and its directors if applicable) to complete this proposal form and to accept the quotation terms for this insurance on behalf of the policyholder and its subsidiaries.

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Signature and company stamp

Position

Date stamp