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Cyber Liability Insurance Questionnaire

1. **Company Name**

_____

2. **NAICS / Industry Code or Description**

_____

3. **Year Business Established**

_____

4. **Street Address**

_____

5. **City, State, Zip**

_____

C. **Current Revenue**
(Most Recent Fiscal Year)

_____

T. **Projected Revenue**
(Next Fiscal Year)

_____

8. **Number of Employees**

_____

9. **Does the company have any revenue-generating operations outside of the US?**

☐ Yes ☐ No

9 (a). **If yes, what percentage is outside the US?**

10. **Any merger/acquisition/divestment or bankruptcy proceeding/financial restructuring in the past 12 months or next 12 months?**

☐ Yes ☐ No

11. **Entity Type**

☐ Holding
☐ Independent
☐ Parent
☐ Subsidiary

12. **Ownership Type**

☐ Non-Profit
☐ Private
☐ Public
☐ Public Sector
☐ Partnership

13. **Domain Names**

_____

14. **Desired Limits**

_____

15. **Policy Deductible**

_____

16. **Proposed Effective Date**

_____

17. **Do policyholder employees authenticate fund transfer requests, prevent unauthorized employees from initiating wire transfers, verify vendor/supplier bank accounts before adding them to accounts payable systems, and complete annual anti-fraud training?**

☐ Yes
☐ No

18. **Does the policyholder provide mandatory security training to all employees annually and ensure third-party service providers comply with IT standards?**

☐ Yes
☐ No

19. **For sensitive information stored on the cloud, does the policyholder encrypt all emails, mobile, and computing devices sent to external parties?**

☐ Yes
☐ No

20. **Does the policyholder enforce Multi-Factor Authentication (MFA) for all employees, contractors, and partners, in addition to cloud deployments, email, mission-critical systems, privileged accounts, VPN, and remote access?**

☐ Yes
☐ No

21. **In the last five (5) years, have you or any other proposed insured know of any past, current, or pending fact, circumstance, situation, event, or transaction surrounding cyber incidents, extortion demands, civil/criminal actions, administrative proceedings, media liability/intellectual property complaints or claims, including any incidents that did or did not require notification under state or federal regulations, or resulted in loss of business income due to unscheduled system downtime?**

☐ Yes
☐ No

22. **Does the policyholder collect, host, store, control, use, process, share, transmit, or have access to any PCI, PII, PHI, or biometric data? If yes, answer the two questions below:**

☐ Yes
☐ No

22 (a). How many PII and PHI records does the policyholder collect, process, store, transmit, or have access to?

22 (b). What is the estimated volume of payment card transactions (credit cards, debit cards, etc.)?

23. **Does the policyholder protect all devices with encryption, anti-virus, anti-malware, and/or endpoint protection software along with pre-screening emails for potentially malicious attachments and links?**

☐ Yes
☐ No

24. **Does the policyholder maintain at least weekly backups of all sensitive or otherwise critical data and all critical business systems offline or on a separate network?**

☐ Yes
☐ No

25. **Does the policyholder have a formal review process in place to screen any published or broadcast material (including digital content), for intellectual property and privacy compliance prior to publication, broadcast, distribution, or use?**

☐ Yes
☐ No

Signature: _____ **Date:** _____