PHILADELPHIA INSURANCE COMPANIES

A Member of the Tokio Marine Group

One Bala Plaza, Suite 100
Bala Cynwyd, PA 19004

INTEGRATED TECHNOLOGY E&O AND CYBER RISK APPLICATION - OREGON

SUBMISSION REQUIREMENTS

- Copies of the Applicant's current contracts or license agreements
- Current audited financial statement
- Five (5) years of currently valued insurance company loss runs

GENERAL INFORMATION (*to be completed by all Applicants*)

1. Applicant Name*(as it should appear on policy):*
2. Street Address:
   City: State: Zip:
3. Website Address:
4. Business Type: Corporation   Partnership   Joint Venture   LLC
5. Ownership Structure: Public   Private   Not-for-Profit
6. Year Established: Number of Employees:
7. Risk Management Contact: Phone:
   Email:

SECTION I - COVERAGES (*to be completed by all Applicants*)

1. Select each coverage and indicate the Limit of Liability and Deductible for which the Applicant is applying.

Coverage	Limit of Liability	Deductible
Technology Errors & Omissions	$	$
Network Security and Privacy Liability	$	$
Employee Privacy Liability	$	$
Media Liability	$	$
Privacy Regulation Defense and Fines	$	$
Loss of Digital Assets	$	$
Non-Physical Business Interruption	$	Hours:
Cyber Extortion Threat	$	$
Security Event Costs	$	$
Cyber Terrorism Coverage	$	Hours:

2. What is the proposed effective date (mm/dd/yyyy) of coverage:
3. Does the Applicant currently have a policy in force providing any of the above coverages?   Yes   No

Coverage	Technology E&O	Media Liability	Network Security/ Privacy Liability	FIrst Party Cyber Expenses
Carrier				
Policy Period				
Limit of Liability	$	$	$	$
Retention	$	$	$	$
Retroactive Date				N/A
Premium	$	$	$	$

SECTION II - REVENUE (*to be completed by all Applicants*)

1. Indicate on what date the Applicant's fiscal year ends:
2. Indicate the Applicant's gross annual revenue for the following twelve (12) month fiscal time periods.

Revenue Split	Prior Fiscal Period	Current Fiscal Period	Next Fiscal Period
Domestic	$	$	$
Foreign	$	$	$
Total	$	$	$

1. Description of operations:

Estimate the total percentage of revenue for the following services and work.

Technology – Software & Services	%	Computers, Electronics, & Hardware	%
All Software Noted Below:		Aircraft/Spacecraft Electronic Components	%
Installed on Customer Systems	%	Circuit Board or Semiconductor Manufacturing	%
Hosted Remotely (SAAS)	%	Computer System Manufacturing	%
Application Service Provider	%	Computer Peripheral/Device Manufacturing	%
Artificial Intelligence Software/Services	%	Computer Maintenance and Repair	%
Billing/ Payment Processing/ E-Commerce	%	Electric Vehicle Charger Sale or Installation	%
Biometric Software or Services	%	Electronic Component Manufacturing	%
Blockchain Based Technology	%	Electronic Device Manufacturing	%
Cloud Data Hosting or Data Backup	%	Industrial Controls/SCADA Systems	%
Co-location without Managed Services	%	Instrument Manufacturing	%
Custom Software Development	%	Office Electronics Leasing/Sale/Service (Copiers, Printers, Managed Print Services)	%
Data Processing & Outsourced Services	%	Optical Instruments/Lens Manufacturing	%
Data Aggregator/Broker/Customer Targeting	%	Recycling/Destruction of Hardware	%
Domain Name Registration	%	Telecommunications Equipment Manufacturing	%
Emergency/911 Call Routing Software	%	Value-Added Resale of Computer or Telecom Hardware	%
IT Managed Service Provider (*manage customer IT Networks/ Systems*)	%	Other (*describe*):	%
IT Managed Security Service Provider (*manage customer IT security*)	%	**Distribution & Value Added Resale**	**%**
		Computer Equipment & Software Distribution	%
IT Consulting	%	Electronic Component Distribution	%
IT Staff Augmentation	%	Value-Added Resale of Computer or Telecom Hardware	%
Mobile Phone Application Development	%		
Network Security Software and Services	%	Value-Added Resale of Software	%
Pre-Packaged Software Development/ Sales	%	Other (*describe*):	%
System Design and Integration	%	**Telecommunication Services**	**%**
Social Media Products/ Services/ Platform	%	**All Installation Work Noted Below**:	
		Performed by the Applicant	%
Technical Support/Repair & Maintenance	%	Subcontracted to Others:	%
		Audio Visual Installation or Integration	%
Training & Education	%	Alarm Integration (Burglar/Fire)	%
Web Portal	%	Alarm Monitoring Services	%
Website Hosting	%	Data Transport/Bandwidth/Wholesale Access	%
Website Construction and Design	%	Internet Service Provider	%
Other (*describe*):	%	Local & Long Distance Service Provider	%
Other (*describe*):	%	Telecommunications Consulting	%
Other Professional Services	**%**	Telecommunication System Installation	%
Accounting or Actuarial Services	%	Video Conferencing Services	%
Advertising/Content Creation Services	%	VOIP Phone System Integration	%
Architect or Engineering Services	%	Wireless/Cellular Services	%
Business Process Outsourcing (*describe services*):	%	Telecom Tower Service and Installation	%
		Other (*describe*):	%
Esports Related Services or Teams	%	Other (*describe*):	%
Legal Services	%		
Warehousing, Logistics, Fulfillment	%	Other (*describe*):	%
Other (*describe*):	%		

Product Code: IT

SECTION IV - CLIENT INFORMATION (*to be completed by all Applicants*)

1. Provide the following information regarding the Applicant's five (5) largest clients.
   (Determined as a percentage of the total gross revenue for the past fiscal year)

Client	Size of Contract	Length of Contract	Description of Services

2. What is the percentage of sales to repeat customers: %
3. Rate the technical level of sophistication of Applicant's average customer:
   Novice   Average   Sophisticated
4. Are procedures in place to evaluate the financial condition and legitimacy of all new clients?   Yes   No
5. Indicate the percentage of products and services the Applicant provides to the following customer segments.

Customer Segment	Products	% of Services
Commercial Client		%
Individual Consumers		%
United States Federal Government		%
United States State and Local Governments		%
Foreign Governments		%

6. Indicate the percentage of revenue derived from the following business sectors.

Business Sector	% of Receipts	Business Sector	% of Receipts
Aerospace & Defense	%	Healthcare/Medical	%
Automobiles & Components	%	Information Technology	%
Chemical	%	Manufacturing	%
Construction & Engineering	%	Media	%
Consumer Services	%	Oil, Gas & Utilities	%
Electrical Equipment	%	Retail	%
Energy Equipment & Services	%	Telecommunication	%
Financial Services	%	Transportation	%

7. Does the Applicant hold non-public information on behalf of their client(s)?   Yes   No
   If yes, please complete Section IX, Information Security.

SECTION V - CONTRACTUAL PROCEDURES (*to be completed by all Applicants*)

1. Does the Applicant require the use of a written contract or agreement for all engagements?   Yes   No
   What percent of sales use written contracts: %   vs.   only purchase orders: %
2. Does the Applicant maintain and enforce a contractual review process?   Yes   No
3. Does this process include review by legal counsel?   Yes   No
4. Does the Applicant have a standard written contract that they use on most engagements?   Yes   No
5. Indicate the percentage of contracts where the Applicant's standard contract, the customer's
   contract, or a combination of both is used.
   Standard: %   Customer: %   Combination: %
6. What contractual provisions does the Applicant strive to impose on most contracts? *(select all that apply)*

Disclaimer of Warranties	Hold Harmless to your Benefit
Dispute Resolution	Limitation of Liability
Exclusions for Consequential Damages	Automatic Billing Credits for Downtime
Exclusive Remedies	Statement of Work
Force Majeure	Venue or Governing Law

7. Does the Applicant have a formal customer acceptance process in place?   Yes   No
8. Are performance milestones accepted with signoffs by both parties?   Yes   No
9. Are interim changes in contracts documented and signed off by both parties?   Yes   No
10. Does anyone other than a principal have the authority to amend the standard contract?   Yes   No
    If yes, who:

SECTION VI - QUALITY CONTROL PROCEDURES (*to be completed by all Applicants*)

1. Who is responsible for handling insurance related matters:

2. Does the Applicant have policies and procedures in place to respond to customer complaints? Yes No
3. Does the Applicant utilize an escalation procedure to respond to customer complaints? Yes No
4. Indicate which of the quality control procedures are in place. (select all that apply)

    Alpha Testing   Customer Service via E-Mail
    Beta Testing   Formalized Training for New Hires
    Business Continuity Plan   Prototype Development
    Customer Screening Process   Vendor Certification Process
    Customer Service via a Toll-Free Number   Written Quality Control Guidelines
    Customer Service via a Web Portal   Other:

5. Does the Applicant have a disaster recovery/business continuity plan? Yes No
   How often do they test it:
6. How often does the Applicant backup critical data and systems?
    No backups   Quarterly full backups   Daily/Weekly full/incremental backups
7. Are backup files stored in a secure location? Yes No
   Where: Onsite   Offsite   Secondary backup hotsite

SECTION VII - SUBCONTRACTED WORK, USE OF SUPPLIERS AND OUTSOURCED MANUFACTURING
(*to be completed by all Applicants*)

1. Does the Applicant sub-contract any professional services or manufacturing to fulfill commitments
   to clients? Yes No
2. If yes, what percentage does the Applicant subcontract: %
3. Does the Applicant utilize a standard sub-contractor agreement? Yes No
4. Does the Applicant require evidence of General Liability from subcontractors? Yes No
5. Does the Applicant require evidence of Errors & Omissions insurance from subcontractors? Yes No

SECTION VIII - MEDIA (*Complete only if applying for Media Liability*)   N/A

Business Activities or Website Contents	% of Receipts	Business Activities or Website Contents	% of Receipts
Advertising/Marketing for Others	%	Music or Sound Clips	%
Social Media Services	%	Sexually Explicit Material	%
File Sharing	%	Sweepstakes or Coupons	%
Interactive Gaming	%	Video Production	%
Movie/Commercial Production	%	Other (*describe*):	%
Website/ Social Media Content	**%**	**Open Source**	**%**
Content created by Applicant	%	Open Source Code originated by Applicant	%
Content supplied by Client	%	Open Source Code created by others and used by Applicant	%
Domain Name Registration	%		

1. If the Applicant distributes computer systems with software included, are the appropriate
   license agreements supplied with each system? N/A Yes No
2. Does the Applicant produce original content as part of their business such as advertising
   ideas, content creation services, logo/brand development? N/A Yes No
   a. If yes, please describe:

   b. If yes, does the Applicant utilize Generative AI in producing original content? N/A Yes No

3. Does the Applicant provide social media content services or provide a social media platform for others to post content?	N/A	Yes	No
a. If yes, please describe:			

4. Does the Applicant offer comparisons of their product/service to competing products/ services?	N/A	Yes	No
5. Does the Applicant have a procedure for reviewing all content that is disseminated via their website?		Yes	No
6. Does the Applicant's website, or any website managed by them, include chat rooms, bulletin boards, or blogs?		Yes	No
a. If yes, does the Applicant review and edit prior to posting?		Yes	No
b. Does the Applicant have a formal procedure for removing controversial or infringing material?		Yes	No
7. Has the Applicant received notification that any of their material or services infringe on the intellectual property rights of others?		Yes	No
8. Risk Management Procedures for all Media Activities			
a. Does the Applicant employ an in-house counsel who specializes in intellectual property rights?		Yes	No
b. Does the Applicant have written intellectual property clearance procedures?		Yes	No
c. Does the Applicant acquire all necessary rights, licenses or consent to use of content?		Yes	No
d. Does the Applicant require employees and contractors to sign a statement that they will not use previous employers' or clients' intellectual property?		Yes	No
e. Does the Applicant have agreements in place with contractors, working on their behalf, granting the Applicant ownership of all intellectual property developed for them?		Yes	No

SECTION IX - INFORMATION SECURITY *(Complete only if applying for Network Security & Privacy Liability Coverage, or if Applicant is responsible for non-public information on behalf of others.)*	**N/A**

Please indicate which type of third party sensitive information resides in the Applicant's network: (Select all that apply)

    Credit card data only for the duration of a transaction then deleted
    Credit card data stored for future use (all but last four (4) digits masked)
    Credit card data stored for future use (un-masked card numbers or including track two (2) data)
    Private health information
    Sensitive or proprietary company information (including trade secrets)
    Bank Account or Financial Records
    Employee/HR Information
    Customer Login Information (usernames with unmasked passwords)
    Other personally identifiable financial information *(describe):*

    Total number of individual Third Party Sensitive Information records above:

BASIC SECURITY		
1. Does the Applicant have anti-virus deployed across their network with automatic updates?	Yes	No
2. Does the Applicant have a firewall in place?	Yes	No
If yes, is it configured to disallow inbound connections by default?	Yes	No
3. Are critical software and network vulnerabilities patched within 30 days?	Yes	No
4. Does the Applicant encrypt all data at rest, in-transit, and on all portable devices which store personal data?	Yes	No
5. Is the Applicant currently up to date with any relevant regulatory and industry framework such as: Payment Card Industry (PCI), Portability & Accountability Ace (HIPPA), Gramm-Leach Bliley, CAN-SPAM Act, or similar?	Yes	No

ADDITIONAL SECURITY

1.	Are access controls employed using the principle of least privilege?	Yes	No
2.	Is critical data backed up physically disconnected "offline" from the internet?	Yes	No
3.	Please confirm that the Applicant has *NO* open Remote Desktop Ports (RDP's).	Yes	No
4.	Does the Applicant require the use of multi-factor authentication (MFA) for:	Yes	No
	a. All remote access (including employees, vendors, and third parties)?	Yes	No
	b. Privileged users?	Yes	No

ADVANCED SECURITY

1.	Does the Applicant utilize any next generation anti-virus or behavioural analysis including Endpoint Detection and Response (EDR)?	Yes	No
	a. If yes, please state which product used (such as CrownStrike Falcon, SentinalOne):		
2.	Are employees trained in phishing and social engineering techniques? How often?	Yes	No
3.	Does the Applicant utilize email filtering tools such as: SPF (Sender Policy Framework), DKIM (DomainKeys Identified Mail), DMARC (Domain-based Message Authentication, Reporting and Conformance)?	Yes	No

ADMINISTRATIVE SECURITY

1.	Does the Applicant have a formal incident response plan?	Yes	No
2.	Does the Applicant have a formal process for approving and testing all external network connections through their firewall?	Yes	No
3.	Does the Applicant have a Chief Information Officer or Chief Information Security Officer or equivalent management role responsible for IT Security and/or compliance?	Yes	No
4.	Has the Applicant undergone an IT security/privacy evaluation/assessment or audit?	Yes	No
	Were any found deficiencies corrected?	Yes	No
5.	Does the Applicant allow storage of non-public personal or commercial information on portable devices or media?	Yes	No
6.	Does the Applicant limit server and data center access to only authorized personnel?	Yes	No
7.	Is remote access for portable devices restricted to Virtual Private Networks (VPNs)?	Yes	No
8.	Does the Applicant have an established procedure for employee departure that includes an inventoried recovery of all information assets, user accounts, and systems access assigned to the individual?	Yes	No
9.	Does the Applicant have a written private policy?	Yes	No
10.	Does the Applicant outsource all payment processing to a PCI-DSS validated merchant or entity?	Yes	No
	a. What are the Applicant's estimated number of transactions in a 12-month period?		
	b. Has the Applicant been PCI certified in the past 12 months?	Yes	No
11.	Does the Applicant require employees to authenticate any requested changes to established vendor, supplier, or customer information (such as: bank account, routing number, contact information) via:	Yes	No
	Predetermined call-back number: Other control (describe):		
12.	Is dual authorization required for all wire transfers?	Yes	No
	If yes, above what amount? $		
13.	Provide the average daily dollar amount of wire transfers: $		
14.	Does the Applicant have any single source providers of raw materials, products, or services (such as: communications, hosting, managed services) which are critical to their business?	Yes	No
	a. If yes, please describe:		
	b. If any of the above providers of raw materials, products, or services failed to deliver as agreed, how quickly would the Applicant be able to secure replacement services?		

15.	Does the Applicant replace factory default settings to ensure information security systems are securely configured?	Always Sometimes Never
16.	Does the Applicant retain personally identifiable information only for as long as needed?	Always Sometimes Never
17.	Does the Applicant discard personally identifiable information when no longer needed by irreversibly erasing or destroying the data using a technique that leaves no residual data?	Always Sometimes Never
18.	Does the Applicant require third parties to whom they entrust personally identifiable information to contractually agree to protect such information using safeguards at least equivalent to their own?	Always Sometimes Never
19.	Does the Applicant's hiring process include conducting background checks on employees?	Always Sometimes Never

SECTION X - HISTORICAL BUSINESS INFORMATION (*to be completed by all Applicants*)

1.	Does the Applicant have any account receivables for professional or technology service contracts that are more than ninety (90) days past due? If yes, attach details.	Yes	No
2.	Within the past five (5) years, has the Applicant sued any customers for non-payment of any contract or licensing fee? **If yes, attach details.**	Yes	No
3.	Within the past five (5) years, have any customers withheld payment or requested a refund of fees because the Applicant's products/ services:		
	a. Did not meet customer's performance expectations?	Yes	No
	b. Did not perform in compliance with the Applicant's warranty or guarantee?	Yes	No
	If yes, attach details.		

SECTION XI - HISTORICAL CLAIMS & INVESTIGATORY INFORMATION (*to be completed by all Applicants*)

1.	Have any technology errors and omissions, media liability, or network security/ privacy injury claims been made during the past five (5) years against the Applicant? If yes, attach a detailed summary, including the name of the claimant, the date the claim occurred, the date it was reported, the demand amount, whether the claim is open or closed, and the amount paid by both the insured and insurance.	Yes	No
2.	Does the Applicant's Chief Executive Office, Chairperson, Chief Financial Officer, President, or Risk Manager have knowledge, information of any circumstance, or aware of any incident or security breach that could give rise to a claim, breach incident, or extortion that would be covered by this policy? If yes, attach a detailed summary, including the name of the claimant or breach details, the date the claim or breach occurred, the date it was reported, the demand amount, and any other pertinent details.	Yes	No
3.	Has the Applicant received any complaints, claims, or been subject to litigation involving matters of privacy injury, intellectual property infringement, denial of service attacks, computer virus infections, theft or information, damage to third party networks or their customers' ability to rely on their network? **If yes, attach details.**	Yes	No
4.	Within the last five (5) years, has the Applicant been the subject of an investigation or action by any regulatory or administrative agency arising out of their business practices? **If yes, attach details.**	Yes	No

<h2 style="text-align:center">FRAUD STATEMENT AND SIGNATURE SECTIONS</h2>

The Undersigned states that they/ them are an authorized representative of the Applicant and declares to the best of their knowledge and belief and after reasonable inquiry, that the statements set forth in this Application (and any attachments submitted with this Application) are true and complete and may be relied upon by Company * in quoting and issuing the policy. If any of the information in this Application changes prior to the effective date of the policy, the Applicant will notify the Company of such changes and the Company may modify or withdraw the quote or binder.

The signing of this Application does not bind the Company to offer, or the Applicant to purchase the policy.
*Company refers collectively to Philadelphia Indemnity Insurance Company and Tokio Marine Specialty Insurance Company

VIRGINIA APPLICANT: READ YOUR POLICY. THE POLICY OF INSURANCE FOR WHICH THIS APPLICATION IS BEING MADE, IF ISSUED, MAY BE CANCELLED WITHOUT CAUSE AT THE OPTION OF THE INSURER AT ANY TIME IN THE FIRST 60 DAYS DURING WHICH IT IS IN EFFECT AND AT ANY TIME THEREAFTER FOR REASONS STATED IN THE POLICY.

<h2 style="text-align:center">FRAUD NOTICE STATEMENTS</h2>

APPLICABLE IN OREGON: 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 MAY COMMIT A FRAUDULENT INSURANCE ACT, WHICH MAY BE A CRIME, AND MAY SUBJECT THE PERSON TO CRIMINAL/CIVIL PENALTIES.

NAME (PLEASE PRINT/TYPE)

TITLE
(MUST BE SIGNED BY THE PRINCIPAL, PARTNER, OR OFFICER)

_____
SIGNATURE

DATE

<h3 style="text-align:center">SECTION TO BE COMPLETED BY THE PRODUCER/BROKER/AGENT</h3>

PRODUCER
(If this is a Florida Risk, Producer means Florida Licensed Agent)

AGENCY

PRODUCER LICENSE NUMBER
(If this a Florida Risk, Producer means Florida Licensed Agent)

ADDRESS (STREET, CITY, STATE, ZIP)