

NOTICE: ALL THIRD PARTY LIABILITY COVERAGES FOR WHICH APPLICATION IS MADE, PROVIDE CLAIMS-MADE COVERAGE (UNLESS THE POLICY IS ENDORSED OTHERWISE) AND THE LIMITS OF INSURANCE UNDER ANY ISSUED POLICY SHALL INCLUDE BOTH THE INDEMNITY PAYMENTS FOR CLAIMS AND PAYMENT OF **CLAIMANT COSTS** AND **CLAIM ADJUSTMENT EXPENSES** AS DEFINED IN THE POLICY. THE APPLICABLE LIMITS OF INSURANCE AVAILABLE WILL BE REDUCED BY AND MAY BE EXHAUSTED BY THE COST OF LEGAL DEFENCE. ANY DEDUCTIBLE OR RETENTION SHALL APPLY TO **CLAIMANT COSTS** AND **CLAIM ADJUSTMENT EXPENSES** AS WELL AS INDEMNITY.

All questions in this application must be answered truthfully and completely for all persons or organizations applying for insurance under this application.

Application Information

1. Please attach sample contracts; including your standard product or services, non-disclosure agreements
2. Most recent Financials (if not available on the Internet)

I. Name, Address and Contact Information:

1. Name: _____
2. Address: _____ City: _____
 Province: _____ Postal Code: _____ Telephone: _____
3. Web Site: _____
4. Name and contact information of Primary Contact (Executive Officer authorized to receive notices and information regarding the proposed policy):
 Name: _____ e-Mail: _____ Telephone: _____

II. Insurance Information:

1. Coverage Part	Coverage Desired	Limit
A Errors Or Omissions	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
B Destructive Programming	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
C Extended Cyber Liability	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
Consumer Redress Fund	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
D Intellectual Property Infringement	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
Disclosure of Confidential Information	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
Reputation Disparagement	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$

First Party Coverages Requested

Basket Limit Coverage includes: Privacy Notification Expenses, Forensics Expenses, Remediation Expenses & Regulatory Costs (Limits in addition to scheduled limits) \$100,000 \$250,000

Additional First Party Coverages

Limit of Insurance Requested

Privacy Remediation Expenses Aggregate Limit

Notification Expenses	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
Forensic Expenses	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
Remediation Expenses	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
Regulatory Costs	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
Cyber Threat	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
Cyber-Reward	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
Confidential Breach Expenses	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
Fines and Penalties	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
Business Interruption and Extra Expense	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$

2. Deductible and Coverage Date Requested:
 Deductible: \$25,000 \$50,000 \$100,000 \$250,000 Other: \$_____
- Proposed Effective Date: _____ Proposed Retroactive Date: _____
- Current insurer _____ Current premium: _____
3. Policy Period Requested:
 From _____ To _____
 both days at 12:01 a.m. at the principal address of the Parent Organization.

III. General Risk Information:

1. Provide your legal structure:
 Publicly Traded Privately Held Subsidiary of Publicly Traded/Private Held Company
2. Year established: _____
3. Description of business operations: _____
4. During the past two years have you completed 3 or more acquisitions? Yes No
 If yes, please answer the following:
 Do you have a formal due diligence process? Yes No
 Does that process include the following:
 Review of prior and pending litigation Yes No
 Evaluation of outstanding contracts or agreements Yes No
 Consideration of existing maintenance agreements Yes No
5. Have you sold any companies during the past 3 years? Yes No
 If yes, please describe: _____

6. Complete the following information:

	Prior Fiscal Year	Current Fiscal Year Annualized Projection	Projected (Next) Fiscal Year
i. Number of Employees			
ii. Gross Revenue	\$	\$	\$
iii. Gross Payroll	\$	\$	\$

- (a) Provide percentage splits of revenues between:
 Canada: % US: % Foreign: %

7. Do you currently purchase specific professional liability or media liability insurance? Yes No
 If yes, please complete table below:

Insurance Carrier	Coverage Provided	Limit of Insurance	Deductible	Effective Date	Retroactive Date
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8. Does Applicant maintain general liability insurance for the purchase of bodily injury, property damage, personal injury and advertising injury coverage, including products-completed operations insurance? Yes No
 If "Yes", indicate whether:
 (a) Professional liability exposures are excluded Yes No
 (b) Security Breach; access or disclosure of personal information are excluded Yes No

IV. Coverage Specific Risk Information:

A. Operational Analysis, Policies And Procedures (applicable To All Applicants)

1. Do you collect, store or process personally identifiable or other confidential information (see listed in (b) below)? Yes No
 If "Yes":
 - (a) How many records are held, including but not limited to prospective, current and former customers, business partners and employees? _____
 - (b) Check all forms of personally identifiable or confidential information that you collect, store or process:

<input type="checkbox"/> Credit Card Information	<input type="checkbox"/> Financial Information	<input type="checkbox"/> Personal Information
<input type="checkbox"/> Customer Information	<input type="checkbox"/> Healthcare Information	<input type="checkbox"/> Trade Secrets
<input type="checkbox"/> Other:		

2. Have you implemented a written information security policy? Yes No
 If "Yes":
 - (a) Is this security policy applicable to all business units? Yes No
 - (b) Do you test the security required by the security policy at least annually? Yes No
 - (c) Do you regularly identify and assess new threats and vulnerabilities and adjust the security accordingly? Yes No
 - (d) Does your information security policy include policies for the use and storage of personally identifiable or other confidential information on mobile devices? Yes No
 - (e) Does your information security policy identify the threats and vulnerabilities and adjust accordingly pertaining to your Industrial Control Systems? Yes No Not applicable

3. Do your information security policies include the following (check all that apply):

<input type="checkbox"/> Fire walls to filter all traffic	<input type="checkbox"/> Regularly scheduled patch management process	<input type="checkbox"/> Use of Penetration and Vulnerability Scans
<input type="checkbox"/> Authentication and Access Lists	<input type="checkbox"/> Encryption used on data at rest and in transit	<input type="checkbox"/> Annual employee and authorized user training
<input type="checkbox"/> Enterprise use of Anti-virus program	<input type="checkbox"/> Access revocation following termination or departure	<input type="checkbox"/> Use of Intrusion Detection

4. Do you have a Business Continuity and Disaster Recovery Plan? Yes No
 If "Yes":
 - (a) Is the Plan reviewed, tested and updated at least bi-annually? Yes No
 - (b) Have any problems identified in review or testing been rectified? Yes No
 - (c) How long would it take to restore operations after a computer attack or other Loss/corruption of data?
 No Interruption < 48 hours Between 48 and 96 Hours > 96 hours

5. Do you have a written incident response plan that addresses network security incidents or privacy threats? Yes No

6. How frequently do you back up electronic data?
 Daily with multi-generations retained Daily Less than daily

7. Do you employ a designated security officer or equivalent (CSO/CISO)? Yes No
 If "No", who within the organization has been designated to manage and implement information security policies, procedures and processes

8. Do you currently use, or have plans in the next year to use, the services of a cloud service or other outsourced service provider? Yes No
 If "Yes", complete the following:
 - (a) What impact would an interruption or cessation of such services have on **Applicant's** ability to meet customer contractual obligations?
 None Slight Significant

- (b) Does **Applicant's** disaster recovery or business continuity plan specifically address restoration and recovery of business operations provided by a cloud service provider? Yes No
- 9. Do you have formalized process when privileged access (e.g. administrator level) is granted? Yes No
 If "Yes":
 - (a) Privileged Access is granted on need only (least privileged) basis Yes No
 - (b) Subject to continuous technological, operational and security review; audit and process improvement. Yes No

B. Technology Products And Services Coverage (Complete if requesting Coverage A.)

Products, Services and Industries Served

- 1. Are your products sold or services offered directly to consumers? Yes No
- 2. Do you presently offer 10 or more distinctive products or services? Yes No
- 3. Have you discontinued any products or services in the past three years?
 If "Yes", do you continue to provide service or maintenance? Yes No
- 4. Do you have any products or services entering new markets or territories within the next year that are substantially different in scope or end use than current products or services? Yes No
- 5. **Technology Customers** - Complete the table below and answer the questions that immediately follow.

Types of Products & Services	Industries Served	Projected (Next) Fiscal Year
Hardware Assembly	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Hardware Component Manufacturing	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Prepackaged Software/Value Added Resellers	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Data Processing	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Consulting	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Custom Software/System Integration	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Network Hardware Manufacturing	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Network Transport	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Network Services	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Network Services, including System Integration	<input type="checkbox"/> Yes <input type="checkbox"/> No	

(a) Indicate the projected next fiscal year revenue derived from:

Type	Projected (Next) Fiscal Year
Software as a Service (SaaS)	\$
Infrastructure as a Service (IaaS)	\$
Platform as a Services (PaaS)	\$
Total	\$

(b) Check if you offer any of the following products or services:

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> Auction, File-Sharing or Social-Networking Web Site | <input type="checkbox"/> Credit Card or Payment-Processing Services | <input type="checkbox"/> Consumer profiling or surveillance products or services | <input type="checkbox"/> Data or Content Retrieval or Aggregation |
| <input type="checkbox"/> Services to intelligence agencies or departments | <input type="checkbox"/> Direct to consumer information security software | <input type="checkbox"/> Business Processing Outsourcing | <input type="checkbox"/> Health Information Exchange (HIE's) |
| <input type="checkbox"/> Enterprise Retail Merchant Services | <input type="checkbox"/> Mobile Application Developer | <input type="checkbox"/> Mobile Phones | <input type="checkbox"/> Security Consulting |
| <input type="checkbox"/> Used or incorporated into any automobile, aircraft, watercraft or transportation product or equipment | | | |

6. Are licensed professionals (e.g. architects, attorneys or physicians) required to fulfill your contractual obligations? Yes No

If "Yes":

(a) Describe the services provided by such Professionals

(b) Do you currently purchase stand-alone professional liability insurance? Yes No

Carrier: _____

Policy Period: From _____ To _____

7. In delivery of your products or provisioning of your services, are you dependent upon third parties to provide raw materials, components or final products? Yes No

If one or more, do any represent 25% or more of your gross revenues? Yes No

If "Yes"; describe 3rd party suppliers who represent 25% or greater in revenue

8. What would be the largest financial and business impact on customers from a failure of any of your products or services?

- No disruption Minor or delayed Major or immediate

If other than "No disruption", describe impact on confidentiality, integrity and availability of data:

9. Do you engage subcontractors or other third parties to provide development, implementation, maintenance or support services? Yes No

(a) What percentage of services are subcontracted? _____%

(b) Do you require subcontractors to carry their own E&O insurance? Yes No

(c) Do you contractually require indemnification from subcontractors? Yes No

(d) Describe services subcontracted to others:

10. Do you have a process to evaluate current and prospective customers, subcontractors and suppliers? Yes No

If "Yes":

(a) Does this process include evaluating financial condition? Yes No

(b) Does this process include evaluating ability to fulfill their commercial and contractual obligations? Yes No

11. Do you derive revenue from performing fee based services to on customer specifications? Yes No

If "Yes": indicate the percentage below:

less than 50% between 50% and 90% greater than 90%

C. Customer Contract & Project Management

1. Do you use a written agreement (e.g., contract, engagement letter, sales agreement, purchase order) with clients?
 Always Sometimes Never
2. Do you have stated minimum contract standards, including any non-disclosure and confidentiality agreements? Yes No
3. Do your global contracts or agreements comply with stated minimum standards? Yes No
4. Do your contracts and agreements include limitation of liability provisions that extend to actual or alleged breach or potential breach of personal information? Yes No
5. Do you contractually assume the obligations to notify affected persons or organizations following an actual data breach? Yes No
6. Do you have a process to ensure that your data and information security policies comply with system and data access agreements from entities that provide you products or services (e.g. financial institutions, cloud service providers or benefit administrator)? Yes No
7. Indicate whether such contracts or agreements include:
 - (a) Your right to verify that recipient of your data is complying with the data security and integrity obligations set forth the contract or agreement Yes No
 - (b) The recipient's rights to verify that you are complying with the data security and integrity obligations set forth in the contract or agreement Yes No
 - (c) Contractual cures and remedies exits in cases of non-compliance Yes No

If "Yes":

 - (a) Does legal counsel or senior management review all such contracts, purchase orders or agreements prior to execution? Yes No
 - (b) What % of the time, do you accept customers' customized contracts, purchase orders or agreements? _____%
8. Indicate whether your contract and project management procedures include the following:
 - (a) A written proposal or request for information in order to determine customer performance expectations Yes No
 - (b) A written contract of specifications of products and services you will provide, signed by the customer Yes No
 - (c) A document outlining the responsibilities of all parties Yes No
 - (d) A document outlining the scope of the project or services Yes No
 - (e) Interim changes documented with customer sign-off Yes No
 - (f) Performance milestones acknowledged and accepted with customer sign-off when achieved Yes No
 - (g) Physical and electronic measures to safeguard customer content, information or material received pursuant to the terms and conditions of all non-disclosure and confidentiality agreements Yes No
 - (h) Formal patch issuance program for your customers Yes No
9. What is the average value of your performance-based contracts, purchase orders or agreements?

10. What is the average duration, in months, of your performance-based contracts, purchase orders or agreements?

11. Provide the following information for the five largest contracts, purchase orders or agreements excluding ongoing service and maintenance revenue:

Customer	Annual Revenue	Contract Amount	Contract Duration	Product or Service
	\$	\$		
	\$	\$		
	\$	\$		
	\$	\$		
	\$	\$		

12. Do you require contractual indemnifications and appropriate insurance (E & O, Professional Indemnity or Cyber) when granting computer access to a third party? Yes No

D. Quality Control

1. Indicate whether your quality control procedures include the following:
 - (a) Written and formalized quality-control program Yes No
 - (b) Alpha testing Yes No
 - (c) Beta testing Yes No
 - (d) Formal customer-acceptance procedure Yes No
 - (e) Systems-development methodology in writing Yes No
 - (f) Formal product-recall plan Yes No
 - (g) Formal policy for documenting and responding to customer complaints or requests for changes or fixes Yes No
 - (h) Use of tools (e.g, static analyzers) or other forensic methodologies to assist in identifying code vulnerabilities Yes No

2. Indicate whether your products or services comply with any of the following accepted industry standards:
 - IEEE ANSI CE Mark UL/CSA ASTM
 - Other(s): _____

3. Do all developers receive training on best practices and techniques for writing secure applications? N/A (does not develop software or firmware) Yes No
 If "Yes"; indicate whether:
 - (a) Developers receive training Secure Development Lifecycle (SDL), including best practices for writing secure applications Yes No
 - (b) Developers use threat modeling to assess the risks and vulnerabilities Yes No

4. Do you have a formalized process to ensure that all products or services are continually evaluated throughout their life cycle for known and latent (security) vulnerabilities? Yes No
 If "Yes":
 - (a) Prior to release and throughout the product lifecycle do you have a methodology to communicate vulnerabilities and remedies; e.g. interim patches? Yes No

5. Do you have a document-retention policy addressing all business functions? Yes No

E. Training, Support & Dispute Resolution

1. Does legal counsel review all external product, sales and marketing material prior to publication and use? Yes No
2. Do you conduct formal sales and marketing training for employees and third party vendors engaged in the sale, service or distribution of your products and services? Yes No

3. Indicate whether you:
- (a) Provide at least two forms of customer or product support Yes No
 - (b) Offer customer support 24 hours a day Yes No
 - (c) Maintain written logs for customer complaints of problems or downtime Yes No
 If “Yes”, how long are they retained? (number of whole or partial months)
-
- (d) Has an formal escalation procedure for unresolved issues greater than 30 days in duration Yes No
4. Do you have any contracts currently past due? Yes No
5. Have you experienced any contract disputes within the past five years? Yes No
 If “Yes”, have any customers withheld payment or requested a refund as a result of a contract dispute within the past three years? Yes No

F. Intellectual Property, Disclosure of Confidential Information and Reputation Disparagement
(Complete if requesting Coverage D.)

1. Do your intellectual property management policies include the following:
- (a) Copyright and trademark searches conducted by qualified legal counsel or a professional search firm, which include looking for your domain name and product/service designs, names or logos. Yes No
 - (b) Acquisition of all rights, licenses, releases and consent for all content, products or services used or created by or for you. Yes No
 - (c) Procedures to prevent the unauthorized disclosure or use of content, Information or material received in writing from the disclosing party pursuant to the terms and conditions of a Non-disclosure Agreement or Confidentiality Agreement. Yes No
 - (d) Legal review of all new products, services, and content prior to release or dissemination. Yes No
 - (e) Hold-harmless and indemnification clauses in your vendor or supplier written contracts or agreements, which inure to your benefit for a third-party supplied intellectual property (IP). Yes No
 - (f) Hold-harmless and indemnification provided to third parties are limited to their use of the **Applicant’s** licensed software, content or other protected materials in accordance with a written contract or agreement. Yes No
 - (g) Agreements with new employees and “work-for-hire” contractors, which that include signed statements prohibiting the use of a previous employer’s or customer’s intellectual property, know-how or trade secrets. Yes No
 - (h) Annual audit to ensure that intellectual property–management policies are followed. Yes No
 - (i) Legal review of your domain name or product/service designs, names or logos with respect to intellectual property laws (including trademark or service mark). Yes No
2. When advertising or promoting your products or services, do you use music, animation or likenesses of famous individuals in your advertisements? Yes No
 If “Yes”, have you secured the proper licenses or permission for use? Yes No
3. Do you use sweepstakes or games of chance in the promotion of your products or services? Yes No
 If “Yes”, are you in compliance with the laws and regulations pertaining to them in all jurisdictions? Yes No
4. Are any products sold or distributed by or for you or any services you offer sold or advertised:
- (a) as being compatible with, alike or a clone of another company’s product or service? Yes No
 - (b) as superior to or comparable to the products or services of others? Yes No

- If yes to either a) or b), is legal review performed prior to the sale or dissemination of such products or services? Yes No
5. Are you an Internet service provider, application service provider or other similar technology service provider, or do you own and/or operate an interactive Web site including features such as a bulletin board, chat room or newsgroup? Yes No
 If "Yes", do you have a formalized notice and take-down procedure? Yes No
6. Do you have a formal Intellectual Property due-diligence process? Yes No
 If "Yes", does that process include the following:
- Identification of all IP assets involved with the sale Yes No
 - Certification of ownership title of all IP assets Yes No
 - Analysis of all legal opinions relating to IP assets Yes No
 - Review of any employment contracts pertaining to ownership of IP assets Yes No
 - An audit of the IP clearance procedures Yes No
7. Have you sold any companies during the past three years? Yes No
 If "Yes", do you have written contracts relating to any of the IP assets retained? Yes No
8. What percentage of your revenue is derived from products or services that are:
- Less than one year old _____ %
 - Between one and two years old _____ %
 - Between two and five years old _____ %
 - Over five years old _____ %
 - Upgrades of existing products _____ %
9. Do you have a written process regarding securing the ownership or use rights of all applicable intellectual property, including source and object code? Yes No
- Does this include determining rights and duties pertaining to open source code? Yes No
 - With respect to securing such rights pertaining to source or object code, do you use a third party (e.g. software IP assessment firm)? Yes No
- If Yes, please provide the name of the third-party firm:

10. Do you receive hold-harmless or indemnification agreements from all third parties who supply source or object code? Yes No
- Does this policy include securing hold-harmless and indemnification agreements from third-party suppliers of source or object code? Yes No
11. Do you have written policies or procedures in place for auditing compliance with software licenses? Yes No

V. Incident And Loss History:

1. **Attach** a complete description of the claims, suits and circumstances, including whether you reported such claims, suits or circumstances to an insurance carrier or sought indemnification from a third party. Yes No
2. In the past five (5) years, have any of **your** products been recalled (voluntary or mandated) from use? Yes No
 If "Yes", attach a complete description of the recall, including whether you reported the recall to any insurance carrier.
3. In the past five (5) years, have there been any administrative, civil or criminal investigations of **you** by any governmental or regulatory authority? Yes No
4. Have you been cited within the past three years for a regulatory violation? Yes No

VI: Applicant Acknowledgement

NOTICE TO APPLICANT - PLEASE READ CAREFULLY.

INFORMATION OR DATA CONTAINED IN OR SUBMITTED IN CONNECTION WITH THIS APPLICATION (OR OTHERWISE TO ANY OF THE MEMBER INSURERS OF THE CHUBB GROUP ("CHUBB") IN CONNECTION WITH THE UNDERWRITING PROCESS) DOES NOT CONSTITUTE NOTICE OF AN OCCURRENCE, WRONGFUL ACT, CLAIM, SUIT OR OTHER CIRCUMSTANCE AND DOES NOT SATISFY ANY OF THE REPORTING NOTIFICATION OR OTHER PROVISIONS OF ANY POLICY. ALL SUCH NOTICES MUST BE GIVEN SEPARATELY IN ACCORDANCE WITH THE APPLICABLE POLICY CONDITIONS.

For the purposes of this application, the above-signed officer of all person(s) and entity(ies) proposed for this insurance declares and acknowledges by clicking where indicated below that he/she has reviewed this application and the statements contained therein with his/her Chief Executive Officer, Chief Financial Officer, Chief Operating Officer or their equivalents and that, to the best of their knowledge and belief, after reasonable inquiry, the statements in this application, and in any attachments, are true and complete. Chubb is authorized to make any inquiry in connection with this application.

Signing this application shall not constitute a binder or obligate Chubb to complete this insurance, but it is agreed this application shall be the basis upon which a policy may be issued.

If the statements in this application or in any attachment change materially before the effective date of any proposed policy, the applicant must notify Chubb, and Chubb may modify or withdraw any quotation.

You understand that the limit of liability under any policy to be issued in response hereto shall include both indemnity payments for claims and payment of claim and defence expenses, as defined in the policy.

PLEASE NOTE: ONLY DULY APPOINTED AGENTS OF CHUBB AND LICENSED BROKERS ARE AUTHORIZED TO SOLICIT APPLICATIONS FOR INSURANCE. AGENTS AND BROKERS ARE NOT AUTHORIZED TO BIND INSURANCE. NO INSURANCE SHALL BE PROVIDED UNLESS CHUBB ACCEPTS THE APPLICATION AND BINDS THE INSURANCE.

By signing below, applicant hereby certifies that the statements made and the information and data supplied herewith are true, accurate and complete.

Authorized Signature of Applicant	Date
Print Name	Title
Authorized Broker (Signature)	
Authorized Broker (Print Name)	

NOTICE TO APPLICANT - PLEASE READ CAREFULLY.

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 COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME AND SUBJECTS SUCH PERSON TO CRIMINAL AND CIVIL PENALTIES, INCLUDING BUT NOT LIMITED TO FINES, DENIAL OF INSURANCE BENEFITS, CIVIL DAMAGES, CRIMINAL PROSECUTION AND CONFINEMENT IN PRISON.

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