



Cyber Insurance





CYBER INSURANCE

In today's increasingly digital environment, every business faces the threat of a cyber risk, despite strengthened cyber security measures and employee education initiatives.

A cyber attack could have serious legal and financial consequences to any business and cause wide-spread reputational damage. It can shut down an operation for days or weeks and be extremely detrimental to the running of the business.

Businesses have a responsibility for protecting their company data, information and computer systems from the increasing likelihood of a breach.

WHAT DOES CYBER INSURANCE COVER?

A policy can offer protection following a breach, covering costs incurred from:

- Common incidents network extortion, cyber espionage, identity theft, data breaches, and online scams.
- First Party Loss business interruption, electronic data replacement, forensic breach response and reputational damage.
- Third Party Loss security and privacy liability, defence cost, regulatory breach liability, multimedia and intellectual property liability.



Application form

| Please fill in your details in print. Name(s) of applicant Address Details of main business operations | | Do you have a privacy policy on your website which has been legally reviewed and includes a statement advising users as to how any information collected will be used and for what purposes? | | | | |
|--|---|---|---|--|---|---------------|
| | | Please state total estimated revenue generated in the following states and overseas: | | | | |
| Contact nameT() | | _ | | | | |
| EmailAnnual Gross Revenue/Turnover | | \/// | TAS | NT | 0/S | |
| Number of staff | | | | | | |
| NETWORK INFORMATION Please check your response. Do you have a Business Continuity Plan (BCP) in force to avoid business disruption due to systems failure? *Informal BCP is acceptable Are all Portable Devices encrypted? If no, do you store sensitive Personally Identifiable Information (PII) on your Portable Devices? Is all sensitive and confidential information stored on your databases, servers and data files encrypted? If no, we strongly recommend doing so and advise cover is subject to encryption. | Y N N Y N N Y N N N N N N N N N N N N N | computer ii. Have a sec stipulates all of the A whether el held by the organisation. iii. Conducts and active identify an security possible. | date anti vii installed an systems. curity policy the types an applicant's in lectronic or of Applicant of on providing penetration by monitor no d assess nev | that identified levels of proformation as otherwise and representation of the etwork traffic withreats and otection process. | wall on all s and rotection for ssets, ad whether n or the Applicant. e systems to regularly d adjust the | Y N Y N Y N Y |
| Do you or any subsidiaries store sensitive information on web servers? Please state the approximate number of debit/credit card transactions processed in the last 12 months | Y N | iv. Conduct be sensitive a basis.v. Have writte Applicant a and that security consequences. | ackup and re and financial en agreeme and any thire uch agreeme | ecovery proceedata on at least the sin place by the single place by the single place by the single place by the single place between the single pl | petween the rvice provider a level of | Y N Y |



Application form continued

HISTORICAL INFORMATION

| Please check your response. | |
|--|-----|
| During the last three years, have you: | |
| Sustained any unscheduled network outages, intrusion, corruption or loss of data? | Y N |
| 2. Received notice or become aware of any privacy violations or that any data or personally identifiable information has been compromised? | Y N |
| 3. Been subject to any disciplinary, regulatory actions, or investigation by any government, regulatory or administrative agency in respect of a cyber or network security incident? | Y N |
| 4. Been involved in a lawsuit, claim or settled any allegations of a suit in respect of a cyber or network security incident? | Y N |
| 5. Become aware of any circumstance or incident that could be reasonably anticipated to give rise to a claim against the type of insurance being requested in this application? | Y N |
| 6. Have you or any subsidiarues experienced a security breach or been required or compelledto notify customers or third parties of the release of sensitive data? | Y |
| 7. Have you, any subsidiaries or any person proposed for coverage under this Policy, ever given notice under the provisions of any prior or current cyber policy or similar insurance of facts or circumstances which might give rise to a claim that would fail within the scope of that cover? | Y N |
| 8. Do you or any subsidiaries have any knowledge of any loss payments, fines or penalties being made on behalf of any Applicant or any person proposed for coverage under any cyber | |
| policy or similar insurance? | Y N |
| | |

If you have answered "Yes" to any of the questions under Historical information, please provide full details and advise on measures implemented to prevent a similar loss for occurring in the future.

DECLARATION

SIGNING THIS PROPOSAL FORM DOES NOT BIND THE PROPOSER OR THE INSURER TO COMPLETE THIS INSURANCE

The undersigned declares that the statement and particulars in this proposal form are true and that no material facts have been misstated or suppressed after enquiry. The undersigned agree that should any of the information given by us alter between the date of this proposal and the inception date of the insurance to which this proposal relates, the undersigned will give immediate notice thereof. The undersigned agrees that the Underwriters may use and disclose our personal information in accordance with the "Privacy Statement" at the beginning of this Proposal. The undersigned agrees that this proposal, together with any other information supplied by us shall form the basis of any contract of insurance effected thereon.

Signature

Full name (please print)

____/___/
Date

Position

IT IS IMPORTANT THE UNDERSIGNED OF THE DECLARATION ABOVE IS FULLY AWARE OF THE SCOPE OF THIS INSURANCE SO THAT THESE QUESTIONS CAN BE ANSWERED CORRECTLY. IF IN DOUBT PLEASE CONTACT THE BROKER OR AGENT, SINCE NON-DISCLOSURE MAY AFFECT AN ASSURED'S RIGHT OF RECOVERY UNDER THE POLICY.

HONAN INSURANCE GROUP PTY LTD (HONAN) HOLDS AN AUSTRALIAN FINANCIAL SERVICES LICENSE 246749. HONAN IS NOT AN INSURANCE COMPANY, RATHER AN INSURANCE BROKER ACTING ON BEHALF OF OUR CLIENT. WHERE WE ACT UNDER A BINDER (AS THE INSURER'S AGENT) WE WILL NOTIFY YOU.

THIS BROCHURE CONTAINS GENERAL INFORMATION AND IS NOT ADVICE. INSURANCE IS ISSUED SUBJECT TO THE TERMS, CONDITIONS AND EXCLUSIONS AS SET BY THE PARTICULAR INSURER. BEFORE CONSIDERING AN INSURANCE PRODUCT YOU MUST READ THE HONAN FINANCIAL SERVICES GUIDE AND RELEVANT PRODUCT DISCLOSURE STATEMENT.

Contact us

LOCATIONS

| MELBOURNE | SYDNEY | BRISBANE | PERTH |
|---------------------|---------------------|---------------------|---------------------|
| (HEAD OFFICE) | | | |
| LEVEL 9, IBM CENTRE | LEVEL 6 | LEVEL 13 | LEVEL 4 |
| 60 CITY RD | 1 MARGARET ST | 40 CREEK ST | 251 ST GEORGES TCE |
| SOUTHBANK | SYDNEY | BRISBANE | PERTH |
| VIC 3006 | NSW 2000 | QLD 4000 | WA 6000 |
| t — +61 3 9947 4333 | t — +61 2 9299 0767 | t — +61 7 3368 3708 | t — +61 8 6557 0400 |

| ADELAIDE | SINGAPORE | NEW ZEALAND |
|---|---|--|
| LEVEL 1, 89 PIRIE ST ADELAIDE SA 5000 | #20-03 1 RAFFLES PLACE SINGAPORE 048616 | UNIT 4, MEZZANINE 17 ALBERT STREET AUCKLAND 1010 |
| t — +61 437 080 655 | t — +65 6559 4500 | t — +64 93 03 33 55 |

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STAY CONNECTED:

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