



# Cyber Risk Insurance Indication Form

860-519-1301 ~ www.tennant.com

1. Company: \_\_\_\_\_
2. Address: \_\_\_\_\_
3. Contact: \_\_\_\_\_ Phone/email: \_\_\_\_\_
4. Year Established: \_\_\_\_\_ Website: \_\_\_\_\_
5. Business Description: \_\_\_\_\_
6. Gross Revenue: \_\_\_\_\_ Cost of Goods Sold: \_\_\_\_\_ (if applicable)
7. Number of Employees: \_\_\_\_\_ Number of Independent Contractors (if any): \_\_\_\_\_
8. Approximate number of customers & employees whose personal or confidential information records you collected, stored, or transmitted during the last 12 months? \_\_\_\_\_
9. Do you have anti-virus software installed and enabled on all desktops, laptops and servers (excluding database servers) and it is updated on a regular basis? [ ] Yes [ ] No
10. Do you have firewalls installed on all external gateways? [ ] Yes [ ] No
11. Do you make regular back-ups at least weekly of all critical data and store the backups offsite or in a fire-proof safe, or does your outsourced service provider meets this standard? [ ] Yes [ ] No
12. Do you store medical records or Protected Health Information (PHI)? [ ] Yes [ ] No  
 If yes, do you conduct reviews to ensure compliance with all relevant HIPAA legislation? [ ] Yes [ ] No  
 If yes, is all PHI transmitted over open networks and/or stored on portable devices encrypted? [ ] Yes [ ] No
13. If you process or store credit card information (where this is not outsourced to a third party that accepts full responsibility for PCI compliance), have you been certified as being PCI compliant within the last 12 months or successfully completed a self-assessment audit? [ ] N/A [ ] Yes [ ] No
14. After full inquiry, are you aware of any breach, hacking, release of data, violation of any breach regulation or law, or any circumstance which may give rise to a claim under the insurance sought here? [ ] Yes [ ] No
15. Do you store personal information on portable devices, including laptops, PDA's, back-up tapes, USB thumb drives and external hard drives? [ ] Yes [ ] No  
 If yes, is such data encrypted to industry standards? [ ] Yes [ ] No
16. Has any claim, complaint, demand or regulatory proceeding been made or initiated against you? [ ] Yes [ ] No
17. Current Cyber: Insurer: \_\_\_\_\_ Effective Date: \_\_\_\_\_  
 Limits: \_\_\_\_\_ Deductible: \_\_\_\_\_ Premium: \_\_\_\_\_

Applicant hereby warrants and represents that the statements and answers made above are true, and applicant has not omitted or misrepresented any information.

Signed: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

**Forward completed application to:**  
**submissions@tennant.com**  
**(860) 519-1301 Fax: 860-216-5845**

**Tennant Risk Services**  
**E&O ~ D&O ~ EPL ~ Cyber**  
**www.tennant.com**