One Bala Plaza, Suite 100 Bala Cynwyd, PA 19004

CYBER SECURITY LIABILITY/PRIVACY LIABILITY NON-BINDING PREMIUM INDICATION FORM

This non-binding premium indication form is for a "non-binding premium estimate" for the prospective insured. A contract of insurance cannot be confirmed and the resulting indication is subject to change.

SECTION I – GENERAL INFORMATION

Name of Applicant: Address of Applicant:

City: State: Zip: Website: www. Telephone: ()

Nature of operations of Insured:

Annual revenue: \$ Number of employees:

SECTION II – RISK CONTROLS				
1.	Do you have a firewall?		Yes	No
2.	2. Do you have a virus protection program in place?		Yes	No
3.	B. Do you have a person responsible for information security?		Yes	No
4.				
	access/presence to others? If yes, please explain:		Yes	No
5.	. Do you have a written privacy or security policy?		Yes	No
6.			Yes	No
7.	Does your hiring process include criminal background checks?		Yes	No
8.	B. Have you ever experienced a privacy breach or security breach?		Yes	No
	If yes, explain via separate sheet.			
9.	Including the services of your vendors?		Yes	No
			Yes	No
10.	. ,			
	or confidential information in your care belonging to third parties onto laptops or other storage media?			
			Yes	No
	If yes, is the information encrypted?		Yes	No
11.)			
	,	Licenses		
		al Health Information		
	Credit Card Numbers Other -	Please specify:		

Any offer of insurance coverage resulting from the submission of this non-binding premium estimate sheet will be an estimate of premium costs, forms, terms and conditions. To secure a bindable quotation, it will be necessary to complete a Cyber Security Liability Insurance application and submit all required attachments.



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