

# Technology E&O Liability Insurance Application

By completing this Application Form, the Applicant is applying for coverage with Northbridge General Insurance Corporation (the "Insurer").

**PLEASE READ CAREFULLY:** This is an Application Form for a Claims Made policy. If a Policy is issued, it will cover only claims first made against the Applicant during the policy period. The payment of claim expenses will reduce the Limit of Liability (*if permitted by the Law*). All questions must be answered completely. If there is no answer, write "none" or "n/a" in the space provided. Where space provided is insufficient to fully answer, please use separate sheet(s).

Please include a copy of the Applicant's sample contracts and marketing materials.

## A. General Information

1. Name of Applicant/Corporation: \_\_\_\_\_

2. Address: \_\_\_\_\_

3. Website: \_\_\_\_\_

4. Year Applicant's Business was established: \_\_\_\_\_

5. Applicant is:      Individual                  Partnership                  Joint Venture                  Corporation                  Other (describe): \_\_\_\_\_

6. Limit of Liability desired:      \$1,000,000                  \$2,000,000                  Other: \_\_\_\_\_

7. Retention:                          \$2,500                          \$5,000                          Other: \_\_\_\_\_

## B. Company & Operations

1. Please describe, in detail, the Applicant's technology products or services for which coverage is requested:

2. Is the Applicant engaged in any business or profession other than as described in (1) above?      Yes      No

If **YES**, please explain:

3. (i) Is the Applicant controlled or owned by or associated or affiliated with, or does the Applicant own, any other firm or business enterprise?      Yes      No

If **YES**, please attach an explanation and indicate if any services described in Question (1) are provided to such firm or business enterprise.

(ii) During the past 3 years, has the Applicant's name changed, or has the Applicant purchased, merged or consolidated with any other business?      Yes      No

If **YES**, did the Applicant assume any liabilities (i.e. responsibility for prior acts) of the acquired, merged or consolidated entity?      Yes      No

4. Does the Applicant own any Subsidiaries for which coverage is requested?      Yes      No

If **YES**, please provide the following information:

Subsidiary Name: \_\_\_\_\_

Jurisdiction: \_\_\_\_\_

Description of Professional Service: \_\_\_\_\_

Subsidiary Name: \_\_\_\_\_

Jurisdiction: \_\_\_\_\_

Description of Professional Service: \_\_\_\_\_

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## B. Company & Operations *(continued)*

**5. Gross Revenue for the last completed Fiscal Year:** \$ \_\_\_\_\_  
 (i) Estimated Gross Revenue for the current Fiscal Year: \$ \_\_\_\_\_  
 (ii) Estimated Gross Revenue for the next Fiscal Year: \$ \_\_\_\_\_

**6. For the Gross Revenue indicated in Question 5 (i), please indicate the approximate percentage derived from clients that are domiciled outside of Canada.**

Country: \_\_\_\_\_ Percentage of Revenue: \_\_\_\_\_ %  
 Country: \_\_\_\_\_ Percentage of Revenue: \_\_\_\_\_ %

**7. Complete the following for all partners, principals and key employees performing the services described in Question (1).**

If more space is required please complete on a separate sheet.

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Number of Years in Practice: \_\_\_\_\_  
 Professional Qualifications: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Number of Years in Practice: \_\_\_\_\_  
 Professional Qualifications: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Number of Years in Practice: \_\_\_\_\_  
 Professional Qualifications: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Number of Years in Practice: \_\_\_\_\_  
 Professional Qualifications: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Number of Years in Practice: \_\_\_\_\_  
 Professional Qualifications: \_\_\_\_\_

(i) Additional employees to those listed in 7 in the following categories:

Clerical: \_\_\_\_\_ Contract: \_\_\_\_\_ Other (specify): \_\_\_\_\_

(ii) What percentage of the Applicant's business involves subcontracting of work to others? \_\_\_\_\_ %

(iii) Does the Applicant require every subcontractor to carry a minimum of \$500,000 in Technology E&O Insurance? Yes No

(iv) Does the Applicant have a written procedural manual for employees to follow? Yes No

(v) Does the Applicant have a formalized training program for newly hired employees? Yes No

## 8. Type of Work

|                               |         |                                     |         |
|-------------------------------|---------|-------------------------------------|---------|
| Consulting                    | _____ % | Hardware Implementation/Integration | _____ % |
| Cloud Computing               | _____ % | Hardware Manufacturing              | _____ % |
| Custom Software Development   | _____ % | Prepackaged Software                | _____ % |
| Customer Support              | _____ % | Software Manufacturing              | _____ % |
| Data Processing/Warehousing   | _____ % | Software Implementation/Integration | _____ % |
| Other (provide details below) | _____ % |                                     |         |

# Technology E&O Liability Insurance Application

## B. Company & Operations *(continued)*

### 9. Type of Product or Service

|                                                                |       |   |
|----------------------------------------------------------------|-------|---|
| Application Service Providers (No Cloud)                       | _____ | % |
| Business Administration and Human Resource Management          | _____ | % |
| Cloud Networking & Infrastructure                              | _____ | % |
| Cloud Platforms & Software                                     | _____ | % |
| Communications equipment                                       | _____ | % |
| Computer Security                                              | _____ | % |
| Data Capture Imaging                                           | _____ | % |
| Decision Support Systems                                       | _____ | % |
| Diagnostics systems                                            | _____ | % |
| Digital Asset Management (Including Backup)                    | _____ | % |
| Domain Name Registration                                       | _____ | % |
| Education/Training                                             | _____ | % |
| Enterprise Applications (CRM, ERP, SCM)                        | _____ | % |
| Facilities Management                                          | _____ | % |
| File Sharing Network                                           | _____ | % |
| Funds Transfer                                                 | _____ | % |
| Industrial Control Systems                                     | _____ | % |
| Integrated Circuits                                            | _____ | % |
| Internet Service Provider (ISP)/Online Service Provider (OSP)  | _____ | % |
| Inventory Management                                           | _____ | % |
| Manufacturing Process Controls                                 | _____ | % |
| Medical products                                               | _____ | % |
| Mobile Phones, Apps/Messaging and Related Hardware or Software | _____ | % |
| Non-Computer Security Systems Software/Hardware or Services    | _____ | % |
| Payment Card Processing                                        | _____ | % |
| Robotics                                                       | _____ | % |
| Search Engine Portals                                          | _____ | % |
| Semiconductor                                                  | _____ | % |
| Servers, PC's, Mainframes and Peripheral Equipment             | _____ | % |
| Social Media, Internet Forums, Chat Rooms                      | _____ | % |
| Supervisory Control and Data Acquisition                       | _____ | % |
| Supply Chain Management                                        | _____ | % |
| Value-Added Reselling                                          | _____ | % |
| Video Game or other Media Content Development                  | _____ | % |

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## B. Company & Operations *(continued)*

### 9. Type of Product or Service *(continued)*

|                                   |       |   |
|-----------------------------------|-------|---|
| Weapon Systems or Defence Systems | _____ | % |
| Wearable Technology               | _____ | % |
| Website Design                    | _____ | % |
| Website Hosting                   | _____ | % |
| Other (provide details below)     | _____ | % |

### 10. Industries Served

|                                                      |       |   |
|------------------------------------------------------|-------|---|
| Aerospace or Aviation                                | _____ | % |
| Agricultural                                         | _____ | % |
| Auction Websites                                     | _____ | % |
| Automotive                                           | _____ | % |
| Construction, Architect or Engineering               | _____ | % |
| Consumer/Home Use                                    | _____ | % |
| E-Commerce                                           | _____ | % |
| Educational Institutions                             | _____ | % |
| Emergency Services                                   | _____ | % |
| Financial Institutions (Banking, Financial Services) | _____ | % |
| Gaming/Lottery/Casino                                | _____ | % |
| Government (Military)                                | _____ | % |
| Government (Non-Military)                            | _____ | % |
| Illicit Content Websites                             | _____ | % |
| Licensed Professionals (Lawyers, Accountants)        | _____ | % |
| Manufacturing/Warehousing                            | _____ | % |
| Marine (Personal)                                    | _____ | % |
| Marine (Commercial/Industrial)                       | _____ | % |
| Marketing/Multimedia                                 | _____ | % |
| Medical/Healthcare/Biomedical/Life Sciences          | _____ | % |
| Music/Entertainment Arts                             | _____ | % |
| Oil & Gas                                            | _____ | % |
| Power & Utilities (Including Nuclear)                | _____ | % |
| Railroad                                             | _____ | % |
| Retail                                               | _____ | % |

# Technology E&O Liability Insurance Application

## B. Company & Operations *(continued)*

### 10. Industries Served *(continued)*

|                               |       |   |
|-------------------------------|-------|---|
| Scientific Measurement        | _____ | % |
| Telecommunications            | _____ | % |
| Torrent Websites              | _____ | % |
| Transportation and Logistics  | _____ | % |
| Other (provide details below) | _____ | % |

### 11. Please provide the following details for the Applicant's five (5) largest projects during the last 3 years:

| Customer | Revenue | Duration | Type of Product or Service |
|----------|---------|----------|----------------------------|
| _____    | _____   | _____    | _____                      |
| _____    | _____   | _____    | _____                      |

## C. Risk Management

### 1. Contract Management

- (i) Does the Applicant use a standard written contract? Yes No
- If **YES**,
- (a) Is it reviewed or created by the Applicant's lawyer? Yes No
- (b) What percentage of the time is this standard contract used? \_\_\_\_\_ %
- (c) Does the Applicant enter into contracts/agreements without legal counsel? Yes No

(ii) Do the contracts that the Applicant enters include or address the following:

|                                                   |     |    |                                        |                                      |
|---------------------------------------------------|-----|----|----------------------------------------|--------------------------------------|
| Consequential Damages                             | Yes | No | _____ % of time                        | In Standard Contract                 |
| Hold Harmless Provisions                          | Yes | No | _____ % of Time in Favour of Applicant | _____ % of Time to Benefit of Others |
| Limitation of Liability                           | Yes | No | _____ % of time                        | In Standard Contract                 |
| Scope of the Services/Deliverables to be Provided | Yes | No | _____ % of time                        | In Standard Contract                 |
| Sign-off/Acceptance Procedures                    | Yes | No | _____ % of time                        | In Standard Contract                 |
| Warranties or Guarantees                          | Yes | No | _____ % of time                        | In Standard Contract                 |

- (iii) Does the Applicant ever make verbal or written promises or guarantees in the Applicant's sales and marketing presentations that would deviate from the Applicant's standard written contracts or sales and marketing materials? Yes No

### 2. Quality Control

- (i) Does the Applicant have a written quality control policy and procedure? Yes No
- If **YES**, does it include the following:
- (a) Alpha-Testing Yes No
- (b) Beta-Testing Yes No
- (c) Formal Customer-Acceptance Procedures Yes No

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## C. Risk Management *(continued)*

### 2. Quality Control *(continued)*

|                                                    |     |    |
|----------------------------------------------------|-----|----|
| (d) Written Systems Development Methodology        | Yes | No |
| (e) Product Recall Plan                            | Yes | No |
| (f) Practices for Identifying Code Vulnerabilities | Yes | No |

### 3. Customer Support/Complaint Handling

|                                                                                                                        |                  |           |                   |
|------------------------------------------------------------------------------------------------------------------------|------------------|-----------|-------------------|
| (i) Does the Applicant's customer support/complaint handling include the following:                                    | Yes              | No        | N/A               |
| (a) 24 Hour Customer Support                                                                                           | Yes              | No        |                   |
| (b) Written Logs of Complaints and Customer Downtimes                                                                  | Yes              | No        |                   |
| (i) How long are they Maintained/Retained?                                                                             | Less than 1 Year | 1-5 Years | More than 5 Years |
| (c) Formal documentation and policy for responding to customer complaints or requests for changes, patches or updates? | Yes              | No        |                   |
| (ii) Does the Applicant inform customers of problems the Applicant discovers?                                          | Yes              | No        |                   |
| (iii) Does the Applicant have an escalation procedure for handling complaints or issues?                               | Yes              | No        |                   |

## D. Data Security

### 1. Does the Applicant's data security measures include the following:

|                                                                                          |     |    |
|------------------------------------------------------------------------------------------|-----|----|
| (i) Firewall/Antivirus                                                                   | Yes | No |
| (ii) Intrusion Detection                                                                 | Yes | No |
| (iii) Encryption Option                                                                  | Yes | No |
| (iv) Limited Access to Systems                                                           | Yes | No |
| (v) Prompted Password Changes for Authorized Users                                       | Yes | No |
| (vi) Data Critical to the Operations of the Organization Backed Up Monthly at a Minimum? | Yes | No |

## E. Intellectual Property

### 1. Do the Applicant's intellectual property management policies include the following:

|                                                                                                                                                                                                                                                             |     |    |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| (i) Copyright and Trademark searches conducted by qualified legal counsel or professional search firm, which include the Applicant's domain name, product/service designs, names and/or logos.                                                              | Yes | No |
| (ii) Acquisition of all rights, licenses, releases and consents applicable to content, products or services used by or created by or for the Applicant.                                                                                                     | Yes | No |
| (iii) Legal review of all new products, services, and content prior to release or dissemination.                                                                                                                                                            | Yes | No |
| (iv) Hold harmless and indemnification clauses which insure to the Applicant's benefit for all third party supplied intellectual property.                                                                                                                  | Yes | No |
| (v) Hold harmless and indemnification clauses the Applicant provides to third parties pertaining solely to the use of the Applicant's licensed software, content or other protected materials in accordance with a mutually executed contract or agreement. | Yes | No |
| (vi) Formal procedure to safeguard against infringing the intellectual property rights of others.                                                                                                                                                           | Yes | No |
| (vii) Agreements with new employees and "work for hire" contractors which include signed statements declaring that they will not disseminate or use a previous employer's or client's intellectual property, know-how or trade secrets.                     | Yes | No |
| (viii) Annual audit to ensure that intellectual property rights are being properly secured and that due diligence procedures are being followed.                                                                                                            | Yes | No |
| (ix) Legal review of the Applicant's domain name, product/service designs, names and/or logos with respect to IP laws (including trade mark or service mark clearances, and comparative advertising) in foreign jurisdictions.                              | Yes | No |

# Technology E&O Liability Insurance Application

## E. Intellectual Property (continued)

### 2. Are any products sold or services the Applicant offers sold or advertised:

- |                                                                                                                                 |     |    |
|---------------------------------------------------------------------------------------------------------------------------------|-----|----|
| (i) As being alike, compatible with, a clone of another company's product or service?                                           | Yes | No |
| (ii) As superior to or use comparisons to the products or services of others?                                                   | Yes | No |
| If <b>YES</b> to either (i) or (ii), is legal review performed prior to the sale or dissemination of such products or services? | Yes | No |

### 3. Does the Applicant incorporate any software products designed by others into their designs?

- |                                                                      |     |    |
|----------------------------------------------------------------------|-----|----|
| If <b>YES</b> , does the applicant always obtain a license to do so? | Yes | No |
|----------------------------------------------------------------------|-----|----|

## F. Prior Insurance

### 1. Please provide the following details for the Applicant's current Professional Liability/Technology Errors and Omissions Insurance policy:

Insurer

| Expiry Date | Limit | Deductible | Premium | Retro Date |
|-------------|-------|------------|---------|------------|
|-------------|-------|------------|---------|------------|

### 2. Has the Applicant ever been declined, non-renewed or cancelled by any insurer for Professional Liability/Errors and Omissions Insurance?

|     |    |
|-----|----|
| Yes | No |
|-----|----|

If **YES**, please explain:

## G. Warranty Statements

### 1. Has the Applicant, or any of the Applicant's employees or independent contractors, ever suspended from practice been investigated by, or by any governing body of his/her profession?

|     |    |
|-----|----|
| Yes | No |
|-----|----|

If **YES**, please explain:

### 2. In the last five years, has any claim ever been made against the Applicant or any of the Applicant's employees or independent contractors?

|     |    |
|-----|----|
| Yes | No |
|-----|----|

If **YES**, please provide **full details on a separate sheet**, including (1) date of such claim, (2) claimant's name, (3) description of allegations of wrong-doing made, (4) amount of indemnity payment and Defence Costs paid and (5) the final disposition or current status of such claim.

### 3. Does the Applicant, or any of the Applicant's employees or independent contractors, have knowledge or information of any act, error, omission or circumstance which might reasonably be expected to give rise to a claim?

|     |    |
|-----|----|
| Yes | No |
|-----|----|

If **YES**, please explain:

Without prejudice to any other rights and remedies of the Insurer, the Applicant understands and agrees that if any such fact, circumstance, or situation exists, whether or not disclosed above in response to Question (G3), any claim or action arising from such fact, circumstance or situation will be excluded from coverage under the proposed policy, if issued by the Insurer.

# Technology E&O Liability Insurance Application

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## H. Declarations

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- (a) The Applicant's submission of this Application, and its attachments, does not obligate the Insurer to issue, or the Applicant to purchase a policy. This Application and its attachments shall be the basis of the contract should a policy be issued and shall be deemed to be attached to and form part of the policy. The Insurer is hereby authorized to make any investigation and inquiry in connection with this Application that it deems necessary.
- (b) Coverage cannot be bound unless this Application form has been fully completed and signed. The undersigned has the power to complete and execute this Application, including Question (G3), on behalf of all persons proposed for this insurance and declares that, after inquiry, the statements set forth herein, together with all materials and information submitted or requested by the Insurer, are true.
- (c) If there is any material change with respect to the information in this Application, and its attachments, prior to the policy inception date, the Applicant must immediately notify the Insurer in writing, and the Insurer may effect changes in, or withdraw, the quotation.

## I. Privacy Disclosure and Consent

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The undersigned, on behalf of the insured organization, acknowledges that any personal information provided in connection with this application (including but not limited to the information contained in this form) has been collected in accordance with applicable privacy legislation and this information shall only be used or shared by the Insurer to assess, underwrite and price insurance products and related services, administer and service insurance policies, evaluate and investigate claims, detect and prevent fraud, analyze and audit business results and/or comply with regulatory or legal requirements.

### COMPLETED AND DULY SIGNED AND DATED.

Signed: \_\_\_\_\_ Please Print Name: \_\_\_\_\_  
Title: \_\_\_\_\_ Date: \_\_\_\_\_