



APPLICATION FOR LAWYER'S DATA BREACH AND NETWORK SECURITY RISK ENDORSEMENT

Firm Name: _____

Contact: _____ E-mail: _____

CNA's Technology and Privacy Self-Assessment describes the recommended minimum practices for questions 1-8, all of which must be answered in the affirmative to qualify for coverage.

- 1. Does your firm have a virus protection program and firewall in place?
2. Does your firm implement security software updates within 30 days of release?
3. Does your firm replace all default settings to ensure your information security systems are configured secure?
4. Does your firm control access to information that resides on data storage devices such as servers desktops, PC's, laptops and smartphones?
5. Does your firm enforce a password management policy?
6. Does your firm ensure that sufficient safeguards are in place for the transmission and storage of data?
7. Does your firm monitor user accounts to identify and eliminate inactive users?
8. Does your firm control access to information that can be displayed, printed, and/or downloaded to external storage devices?

9. History of Claims & Complaints

After inquiry, in the past 5 years, has the firm, any predecessor firm, any current or former attorney of the firm while affiliated with the firm, received any complaints or become aware of, claims, prior incidents, circumstances, or events that could reasonably give rise to a claim involving matters of privacy injury, including but not limited to unauthorized access to non-public personal information or corporate confidential business information, identity theft, denial of service attacks, theft of information, damage to others' networks or others' ability to rely on your network or similar?

If "yes", explain via separate attachment, or provide a claim supplement.

10. Total revenue for the firm's last full fiscal year \$ _____

FRAUD NOTICE - Where Applicable Under The Law of Your Firm's State

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 or incomplete information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime and may be subject to civil fines and criminal penalties...

Applicant:

By SIGNATURE OF OFFICER OR PARTNER OF THE FIRM PRINT NAME OF OFFICER OR PARTNER DATE