CYBER INSURANCE ITOO GO

Commercial Cyber Insurance recommended by The Law Society of South Africa for companies under R25m revenue



Name	e of Ins	ured											
Physical address		ress		Postal code									
Registration number Email address		number	VAT number Contact number										
		SS											
	ils of pr services	oducts offered											
Policy inception date		tion date	Annual revenue	R									
Brokerage name		ame Marsh	Marsh Limit of indemnity R				R						
		ou answer No to any of the questions below, please complete a full proposal form instead. Upon rece					quired	d to					
		dersigned confirm that the Insured:			Г								
1.	collec	ts, stores or processes zero or less than 100 000 uni	que payment cards per year		Yes		No						
2.	collects, stores or processes less than 100 000 personally identifiable records						No						
3.	 is not aware of any circumstances within the past 5 years that would have, may give or has give to a claim under the coverage provided by this insurance policy 						No						
4.	has ir	nplemented and complies fully with the following m	inimum-security requiremen	ts:	Yes		No						
 4.1. next generation anti-virus/anti-malware which is updated as per the providers recommendations 4.2. processes to apply security related patches/updates within 3 months of release 4.3. not using any outdated software which is no longer supported by the vendor 4.4. password controls including: length of at least 10 characters; use of passwords which are not easy to guess authentication or passwords changed at least quarterly (unless passwords of at least 14 characters are used are not reused for at least 5 changes and accounts are locked out after at most 10 failed authentication atten 4.5. default operating system or application installation/administration accounts secured by changing passwords f 								words					
	 known default passwords and where possible accounts are disabled, deleted or renamed 4.6. resiliency procedures for Sensitive Systems and Sensitive Data including weekly backup generation or replication, monitoring or testing to ensure successful generation, having a copy which at any point in time is disconnected, offline or cannot be overwritten from the production environment and test the ability to restore or read copies at least every 6 months 												
	•	have a company network, please also confirm that ity requirements:	you have implemented and	comply fully with	the fol	llowing	; mini	mum-					
	4.7.	next generation firewalls with geo-location blocking	g configured										
	4.8.	generally accepted vulnerable network services a	nerally accepted vulnerable network services are secured via disabling/blocking on the firewall or where required tricted based on IP address and/or to secured areas										

Americal Devices	*Deductible	Limit of Indemnity (per claim and in the annual aggregate)						
Annual Revenue	Deductible	R1 000 000	R2 500 000	R5 000 000				
R0-R25 000 000	15 000.00	R4 950.00	R8 500.00	R12 805.00				

4.9. administrative/remote access exclusively over secured channels e.g. virtual private network (VPN)

4.10. **Sensitive System** activity logs are stored for at least 6 months

Annual premiums reflected * Each and every claim

Terms and Conditions

- The applicable policy wording is the iTOO Go Cyber Insurance policy wording, including:
 - A: Cyber Liability
 - B: Crisis Management and Notification Expenses
 - C: First Party Expenses
 - D: Loss of Business Income

To submit your application please click here

- E: Cyber Extortion
- F: Digital Media Liability
- Business interruption deductible is 12 hours and is sub limited to 50% of the annual limit of indemnity
- Premiums include 15% VAT and 20% Commission
- Quotation valid for 30 days from the date of declaration
- Unless otherwise requested, policy will run for 12 months from the date of inception
- Retroactive date as per inception date unless prior uninterrupted cyber insurance cover has been held
- Risk dependent ITOO reserves the right to review and adjust the above premiums

Privacy

In accordance with the applicable laws, we may be required to share your personal information with other insurers, industry bodies, credit agencies and service providers. This includes information about your insurance, claims and premium payments. We do this to provide insurance services, prevent fraud, assess claims and conduct surveys. We will treat your personal information with caution and have put reasonable security measures in place to protect it. By signing this application for insurance, you agree to the processing and sharing of your personal information.

Declaration

This application does not bind the Proposer to buy or the insurer to issue the insurance, but it is agreed that this form shall be the basis of the contract should a policy be issued. The Proposer declares that the statements set forth in this application are true. The Proposer further declares that if the information supplied on this application changes between the date of this application and the time when the policy is issued, the Proposer will immediately notify the insurer of such changes and the insurer may withdraw or modify the proposed terms of insurance.

to submit your application, prease <u>click here</u>										
Name	Position	Position								
Signature	Date	Υ	Υ	Υ	Υ	M	M	D	D	