

Supplementary Information for Criminal Financial Loss cover

Email Screening

1) How do you authenticate emails? Tick all that apply:

- External emails are identified as such on arrival
- SPF (Sender Policy Framework)
- DKIM (Domain Keys Identified Mail)
- DMARC (Domain Message Authentication Reporting and Conformance)
- We use 3rd party security software to screen emails as they arrive
- We do not screen incoming emails

Other - Please describe:

Own Funds & Controls

- 2) What is the estimated annual value of your own fund transfers? \$ _____
- 3) What is the maximum value of funds transferred at any one time? \$ _____
- 4) For your own funds, do you have arrangements with your bank to verify with you, prior to transfer and over an agreed channel, all transfers:
- Yes ___ No ___ To foreign bank accounts
- Yes ___ No ___ Not consistent with previous transfers

Yes ___ No ___ In excess of a specific amount?

Please specify: \$ _____

Other - Please describe:

5) Are additional internal approvals or verification required for transfers:

Yes ___ No ___ To foreign bank accounts

Yes ___ No ___ Made on an "Urgent" or "Emergency" basis

Yes ___ No ___ Requested by Sr Mgmt. while in absentia

Yes ___ No ___ That are not consistent with previous transfers

Yes ___ No ___ In excess of a specific amount?

Please specify: \$ _____

3rd Party Funds & Controls

6) Do you have access to or control of funds belonging to a 3rd party? Yes ___ No ___

7) Do you require cover for 3rd party funds under your control? Yes ___ No ___

Further questions if you wish to cover your 3rd party funds exposure:

8) What volume of 3rd party funds are in your control? \$ _____

9) Are there pre-agreed limits on how much you can transfer? Yes ___ No ___

- 10) What is the maximum value of funds transferred at any one time? \$_____
- 11) Can transfers be made to an account which has not been pre-agreed? Yes ___ No___
- 12) Do you authenticate all transfers with the 3rd party prior to release? Yes ___ No___
- 13) Does the client's financial institution authenticate instructions prior to payment? Yes ___ No___

Payment Flowchart & Breach and Compliance Register

Please provide a Flowchart of your payment process, and include:

- the name of the person responsible for monitoring and maintaining it, and
- the date last reviewed.

Declaration

I/We acknowledge that:

- 1) I/We have read and understood the Important Information set out in the quotation and I/We are authorised to complete this quotation.
- 2) All information given on this quotation and any attachment is true and correct.
- 3) I/We authorise the underwriter to give to, or obtain from, other insurers or any credit reference service, any information relating to insurance held by me/us or any claim in relation thereto.
- 4) I/We acknowledge that, where answers are provided in the quotation are not in my/our handwriting, I/We have checked and certify that the answers are true and correct.

Signature:

Date:

Important Information

Your Duty of Disclosure

Before **you** enter into an insurance contract, **you** have a duty to tell **us** anything that **you** know, or could reasonably be expected to know, may affect **our** decision to insure **you** and on what terms.

You have this duty until **we** agree to insure **you**.

You have the same duty before **you** renew, extend, vary or reinstate an insurance **policy**.

You do not need to tell **us** anything that:

- reduces the risk **we** insure **you** for; or
- is common knowledge; or
- **we** know or should know as an insurer; or
- **we** waive **your** duty to tell **us** about.

If you do not tell us something

If **you** do not tell **us** anything **you** are required to, **we** may cancel **your policy** or reduce the amount we will pay **you** if **you** make a **claim**, or both

If **your** failure to tell **us** is fraudulent, **we** may refuse to pay a claim and treat the **policy** as if it never existed.