

# Cyber Liability Insurance Application

## Business Information

Business Name

Contact Person

Address

City

State

ZIP Code

Phone

Email

## Business Details

Type of Business

Years in Operation

Number of Employees

Annual Revenue

## Cyber Risk Information

Do you have a dedicated IT provider?

Types of Sensitive Data Stored or Handled

Have you experienced any cyber incidents in the past 5 years?

If yes, please provide details

Coverage & Limits

Requested Coverage Amount

Requested Deductible

Additional Information

Comments or Questions