## Big Cyber Coverage at a Small Business Price

**Wisconsin Retail Insurance Agency Cyber Liability Program**

Coverage for a Retail Insurance Agency policy includes:

### The Basics
- Network Security
- Data Breach and Privacy Liability
- Regulatory Defense and Settlement
- PCI Fines and Penalties
- Data Protection Loss
- Business Interruption
- Website Media Liability

### Plus Enhancements
- Business Interruption
- Cyber Extortion/Ransom
- Fraudulent Funds Transfer
- Electronic Crime
- Social Engineering/Fraudulent Instructions sub-limited to $50,000

### And Claims Support
- Expert Support online
- Public relations firm
- Forensic investigators
- Data Breach Coach

---

**To bind coverage, please check the box corresponding to your most recent annual revenue and coverage option below, complete the attached application and email to hhodel@piaw.org. Please call (800) 261-7429 with any questions.**

<table>
<thead>
<tr>
<th>Coverage Limit</th>
<th>Premium*</th>
<th>Revs &lt; $1M</th>
<th>Revs $1M – $2M</th>
<th>Revs $2M - $3M</th>
<th>Revs $3M - $4M</th>
<th>Revs $4M - $5M</th>
<th>Revs $5M - $7.5M</th>
<th>Revs $7.5M - $10M</th>
</tr>
</thead>
<tbody>
<tr>
<td>$250,000 Limit</td>
<td></td>
<td>$1,000 Retention</td>
<td>$2,500 Retention</td>
<td>$2,500 Retention</td>
<td>$2,500 Retention</td>
<td>$2,500 Retention</td>
<td>$5,000 Retention</td>
<td>$10,000 Retention</td>
</tr>
<tr>
<td>Premium*</td>
<td></td>
<td>$570</td>
<td>$774</td>
<td>$909</td>
<td>$1,045</td>
<td>$1,215</td>
<td>$1,442</td>
<td>$2,009</td>
</tr>
<tr>
<td>$500,000 Limit</td>
<td></td>
<td>$1,000 Retention</td>
<td>$2,500 Retention</td>
<td>$2,500 Retention</td>
<td>$2,500 Retention</td>
<td>$2,500 Retention</td>
<td>$5,000 Retention</td>
<td>$10,000 Retention</td>
</tr>
<tr>
<td>Premium*</td>
<td></td>
<td>$706</td>
<td>$961</td>
<td>$1,131</td>
<td>$1,301</td>
<td>$1,513</td>
<td>$1,839</td>
<td>$2,575</td>
</tr>
<tr>
<td>$1,000,000 Limit</td>
<td></td>
<td>$1,000 Retention</td>
<td>$2,500 Retention</td>
<td>$2,500 Retention</td>
<td>$2,500 Retention</td>
<td>$2,500 Retention</td>
<td>$5,000 Retention</td>
<td>$10,000 Retention</td>
</tr>
<tr>
<td>Premium*</td>
<td></td>
<td>$932</td>
<td>$1,272</td>
<td>$1,499</td>
<td>$1,725</td>
<td>$2,009</td>
<td>$2,292</td>
<td>$3,142</td>
</tr>
<tr>
<td>$2,000,000 Limit</td>
<td></td>
<td>$2,500 Retention</td>
<td>$5,000 Retention</td>
<td>$5,000 Retention</td>
<td>$5,000 Retention</td>
<td>$5,000 Retention</td>
<td>$10,000 Retention</td>
<td>$25,000 Retention</td>
</tr>
<tr>
<td>Premium*</td>
<td></td>
<td>$1,385</td>
<td>$1,895</td>
<td>$2,235</td>
<td>$2,575</td>
<td>$2,858</td>
<td>$3,142</td>
<td>$4,275</td>
</tr>
</tbody>
</table>

*Includes individual state surplus lines taxes and policy fees.
Application – Great American Insurance NextGen Cyber Liability Insurance

Effective Date: __ /___ / ___  Coverage cannot be backdated.

Agency Name:___________________________________

Agency Address, state and zip code______________________________________

1. The Company has been in business more than 3 years.
2. The Company only engages in retail insurance agency operations.
4. The Company presently uses commercially available firewall protection and commercially available anti-virus protection.
5. The Company presently uses or will implement a call back procedure to customers, vendors, or banks using previously established phone numbers prior to any funds transfer in excess of $5,000.
6. You or any individual or entity proposed for coverage are not aware of any fact or circumstance that can be reasonably foreseen to give rise to a claim or loss that may fall within the scope of the proposed insurance.
7. The Company has not experienced any of the following situations in the last five years:
   a. a data breach requiring you to notify individuals of the breach.
   b. loss of any laptop, smartphone, or other mobile device with PII or PHI,
   c. a hacking incident including but not limited to a system intrusion, tampering, virus or malicious code attack, regulatory inquiry, investigation or action related to data or network security.
   d. Allegation by anyone (including allegation by an employee of the Company) that their personal information has been compromised.

You are confirming that the above information is true by signing below.

Signature:___________________________________  Print __________________________

Email Address of signer ______________________________________

Send this executed form to hhodel@piaw.org and a policy will be emailed to you within 48 hours.

Cyber Coverage provided through a partnership with ABA Insurance Services and Great American Insurance Group