

HSB Total Cyber™ Common Policy Declarations

~~Insuring Company~~

~~The Hartford Steam Boiler Inspection and Insurance Company~~

~~Presented by~~

~~Name and Mailing
Address~~

~~To report a claim~~

~~Phone: 1-888-HSB-LOSS (472-5677)~~

~~Fax: 1-888-329-5677~~

~~Email: New_Loss@hsb.com~~

~~To ask a question or request a change to your policy~~

~~Phone: 1-800-472-1866~~

~~Your Policy~~

~~Issue Date~~

~~Policy Number~~

~~Reason for Issuance~~

~~Your Details~~

~~Named Insured~~

~~Your Mailing Address~~

Common Policy Declarations, continued

Policy Period

Dates commence at 12:01 A.M. Standard Time at your mailing address shown above.

Effective Date	_____
Expiration Date	
Renewal Date	

Premium

Cyber Risk Coverage	\$_____ Annual Premium
Taxes and Surcharges	\$_____ <i>For a complete breakdown of Taxes and Surcharges, refer to the applicable Coverage Part Declarations.</i>
Premium including Taxes and Surcharges	\$_____

Notices

Your policy may contain a Notice to Policyholders. State-specific notices are contained in the applicable 'State Changes' documents, attached at the end of your policy. Other notices may appear at the beginning of your policy.

Forms

This policy is made up of these Declarations and the following forms:

		Eff.	Issue	
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Common Policy Declarations, continued

Form Name	Form Number	Date	Date	

Other Conditions	

HSB Total Cyber™ Cyber Risk Coverage Part Declarations

Producer Information

Your Details

Name and Mailing Address

Named Insured	
Policy Number	
Issue Date	
Effective Date	
Retroactive Date	If no retroactive date is shown, retroactive date is the organization date of the Named Insured.

Insuring Company

~~Your Name~~ **Cyber Risk**
~~Aggregate Limit~~

The Hartford Steam Boiler Inspection and Insurance Company

Common Policy Declarations, continued

~~Cyber Risk Aggregate~~ ~~Limit~~ ~~Mailing Address~~ ~~Contact Information:~~ ~~\$One State Street, Hartford, Connecticut 06102-5024~~

~~To report a claim~~

~~Phone: 1-888-HSB-LOSS (472-5677)~~

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~~Email: New_Loss@hsb.com~~

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your policy~~

~~Phone: 1-800-472-1866~~

Policy Information

~~Coverage 1—Data
Compromise Response
Expenses~~ ~~Named Insured~~

~~Data Compromise
Response
Expenses~~ ~~Headquarters
Address~~

~~\$
Annual Aggregate Limit~~

~~Sublimits for
Coverage 1~~ ~~Mailing
Address~~

~~Forensic IT Review~~ ~~Policy
Number~~

~~\$
Any one "Personal Data Compromise"~~

Legal Review	\$ Any one "Personal Data Compromise"
Public Relations	\$ Any one "Personal Data Compromise"
Regulatory Fines and Penalties	\$ Any one "Personal Data Compromise"
PCI Fines and Penalties	\$ Any one "Personal Data Compromise"

~~Deductible~~ ~~Reason for
Coverage 1~~ ~~Issuance~~

Common Policy Declarations, continued

Coverage 1—Data Compromise Response Expenses Issue Date \$ Any one “Personal Data Compromise”

Transaction Effective Date

Retroactive Date

If no retroactive date is shown, retroactive date is the organization date of the Named Insured.

Policy Period

Coverage 2—Identity Recovery Policy Period to Effective at 12:01 A.M. Standard Time at your mailing address shown above.

Identity Recovery	\$ Annual Aggregate Limit
Identity Recovery Help Line Number	1-800-472-1866
Sublimits for Coverage 2	
Lost Wages and Child and Elder Care	\$
Mental Health Counseling	\$
Miscellaneous Unnamed Costs	\$
Deductible for Coverage 2	
Coverage 2—Identity Recovery	Not Applicable

Transaction Premium Summary

Cyber Risk Coverage 3—
Computer Attack

Common Policy Declarations, continued

<u>Computer Attack Taxes</u>	\$	
<u>and Surcharges</u>		Annual Aggregate Limit
<u>Breakdown</u>		Kentucky Firefighter & Law Enforcement Surcharge
<u>Sublimits</u> for		Kentucky Local Government Tax
<u>Coverage 3</u>		
<u>Data Re-creation</u>	\$	
		Any one "Computer Attack"
		Municipality:
<u>Loss of Business</u>	\$	
		Any one "Computer Attack"
		County:
<u>Public Relations</u>	\$	
		Any one "Computer Attack"
		New Jersey Guaranty Fund Surcharge
<u>Deductible</u> for		West Virginia Fire and Casualty Surcharge
<u>Coverage 3</u>		
		Coverage 3 — Computer Attack Total Taxes and Surcharges
	\$	Any one "Computer Attack"
<u>Terrorism</u>	\$0	
<u>Total Premium, Taxes and Surcharges</u>		

Limit

Cyber Risk Aggregate Limit

Coverage 4 — Cyber Extortion

Cyber <u>Extortion Risk</u>	\$
<u>Aggregate Limit</u>	Annual Aggregate Limit

Deductible for Coverage 4

<u>Coverage 4 — Cyber Extortion</u>	\$
	Any one "Cyber Extortion Threat"

Common Policy Declarations, continued

<u>Coverage</u>		<u>Amount</u>
<u>Coverage</u>		
<u>1.</u>	Coverage 5—Data Compromise Liability Response Expenses (Annual Aggregate Limit) <u>Crisis Management Sublimit (Any one “Personal Data Compromise”)</u> <u>Regulatory Fines and Penalties Sublimit (Any one “Personal Data Compromise”)</u> <u>PCI Fines and Penalties Sublimit (Any one “Personal Data Compromise”)</u> <u>PCI Assessments</u> <u>Additional Response Expenses Limit</u> <u>Deductible (Any one “Personal Data Compromise”)</u>	
<u>2.</u>	Identity Recovery (Annual Aggregate Limit) <u>Lost Wages and Child and Elder Care Sublimit</u> <u>Mental Health Counseling Sublimit</u> <u>Miscellaneous Unnamed Costs Sublimit</u> <u>Deductible</u> <u>Identity Recovery Help Line Number: 1-800-472-1866</u>	<u>Not Applicable</u>

Common Policy Declarations, continued

<u>Coverage</u>		<u>Amount</u>
<u>3.</u>	<p><u>Computer Attack</u> (Annual Aggregate Limit)</p> <p><u>Data Re-creation Sublimit</u> (Any one "Computer Attack")</p> <p><u>Crisis Management Sublimit</u> (Any one "Computer Attack")</p> <p><u>Future Loss Avoidance</u></p> <p><u>Deductible</u> (Any one "Computer Attack")</p> <p> </p> <p><u>Loss of Business Sublimit</u> (Including Contingent Loss of Business and Extended Income Recovery) (Any one "Computer Attack")</p> <p><u>"Waiting Period"</u></p> <p><u>"Maximum Period of Restoration"</u></p> <p><u>"Extended Recovery Period"</u></p> <p><u>Costs of Forensic Accountant</u></p> <p> </p> <p><u>Contingent Loss of Business – Interruption of Supply Sublimit</u> (Any one "Computer Attack")</p>	
<u>4.</u>	<p><u>Cyber Extortion</u> (Annual Aggregate Limit)</p> <p><u>Deductible</u> (Any one "Cyber Extortion Threat")</p> <p> </p> <p><u>Data Compromise Liability</u> (Annual Aggregate Limit)</p>	\$
<u>5.</u>		Annual Aggregate Limit
	<p><u>Deductible for Coverage 5</u></p> <p><u>Data Compromise Defense</u></p> <p><u>Data Compromise Liability</u></p> <p><u>Privacy Incident Liability</u></p>	
	<p><u>Coverage 5 – Data Compromise Liability</u></p> <p>\$</p> <p><u>Deductible</u> (Any one "Claim" or "Regulatory Proceeding")</p>	

Common Policy Declarations, continued

<u>Coverage</u>		<u>Amount</u>
<u>6.</u>	<u>Network Security Liability (Annual Aggregate Limit)</u> <u>Network Security Defense</u> <u>Network Security Liability</u> <u>Deductible (Any one "Claim")</u>	
<u>7.</u>	<u>Electronic Media Liability (Annual Aggregate Limit)</u> <u>Electronic Media Defense</u> <u>Electronic Media Liability</u> <u>Full Media Liability</u> <u>Deductible (Any one "Claim")</u>	
<u>8.</u>	<u>Misdirected Payment Fraud (Annual Aggregate Limit)</u> <u>Deductible (Any one "Wrongful Transfer Event")</u>	
	<u>Computer Fraud (Annual Aggregate Limit)</u> <u>Deductible (Any one "Computer Fraud Event")</u>	
	<u>Reputational Harm (Annual Aggregate Limit)</u> <u>"Period of Indemnification"</u> <u>Deductible (Any one "Personal Data Compromise")</u>	
	<u>Reward Payment Reimbursement (Annual Aggregate Limit)</u> <u>Deductible (Any one "Reward Payment Qualifying Event")</u>	
	<u>System Failure (Annual Aggregate Limit)</u> <u>"System Failure Waiting Period"</u> <u>"System Failure Maximum Period of Restoration"</u> <u>Deductible (Any one "System Failure")</u>	
	<u>Telecommunications Fraud (Annual Aggregate Limit)</u> <u>Deductible (Any one "Computer Attack")</u>	

Forms

Common Policy Declarations, continued

This policy is made up of this Cyber Risk Coverage Part Declarations and the following forms:

Coverage 6—Network Security Liability	Form Number	Eff. Date	Issue Date
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Form Name

_____ Network Security Liability	\$ _____	_____	_____
	Annual Aggregate Limit		
_____ Deductible for Coverage 6	_____	_____	_____

Coverage 6—Network Security Liability	\$ Any one "Claim"
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Coverage 7—Electronic Media Liability

Electronic Media Liability	\$ Annual Aggregate Limit
_____ Deductible for Coverage 7	
Coverage 7—Electronic Media Liability	\$ Any one "Claim"

Other Conditions

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Tax and Surcharge Breakdown
