



PO Box 2258
Bismarck, ND 58502
1-800-421-1988(phone)
1-701-224-0609(fax)
underwriting@NDIRF.com
www.ndirf.com

DATA BREACH COVERAGE APPLICATION

Named Member: _____

Occurrence limit requested: _____

Annual aggregate limit requested: _____

Retention limit requested (minimum \$25,000): _____

1. Municipality operating budget:

(a) Estimated annual operating budget for the coming year: \$ _____

(b) For the past twelve (12) month period: \$ _____

2. How many office locations? _____

3. Number of employees on staff? _____

4. Current population? _____

5. Number of current and past community members paying bills through a website? _____

6. Number of current and past taxpayers? _____

7. Number of years the municipality has been in existence? _____

8. Number of total records for current and past populations? _____

9. Number of total records for current and past members paying bills through website? _____

10. Number of total records for current and past taxpayers? _____

11. Are critical municipality resources and systems completely segregated from any member networks? [] Yes [] No

12. Does the municipality handle sensitive data for any of the following:

Table with 3 columns: Question, Transmit/Receive, Store. Rows include Credit Cards/Debit Cards, Financial/Banking Information, Medical Information (PHI), Social Security Numbers or National Identification Numbers, Driver's License Numbers, Student Records, and Other (specify).

* Approximate number of credit/debit card transactions for the coming year: _____

** Approximate number of individuals for which PHI is collected, transmitted or stored: _____

*** Approximate number of student record/current enrollment #: _____/_____

13. Does the municipality store sensitive information (as defined below) on any of the following media? If Yes, is it encrypted?

	<u>Sensitive Data</u>	<u>Encrypted</u>
(a) Laptop hard drives?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
(b) PDA's / other mobile devices?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
(c) Flash drives or other portable storage devices?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
(d) Back-up tapes?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
(e) Internet connected web servers?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
(f) Databases, audit logs, files on servers?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
(g) Email?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

14. Does the municipality have a dedicated senior manager responsible for Information Security and Privacy? Yes No

15. Does the municipality allow the use of laptops, mobile devices or other portable media? Yes No

(a) If yes, does the municipality ensure all sensitive information is encrypted? Yes No

16. Does the municipality have other ancillary services such as:

Libraries: Yes No

Medical / Hospital: Yes No

Other? _____

17. Has the municipality at any time during the past three (3) years had any incidents, claims or suits involving unauthorized access, intrusion, breach, compromise, or misuse of the municipality's network, including embezzlement, fraud, theft of proprietary information, denial of service, electronic vandalism or sabotage, computer virus or other incident whether or not reported to its insurance carrier? Yes No

If yes, attach a separate document describing each incident including the cause, internal costs, cost to third parties, length of time involved in recovery and steps taken to mitigate exposure in the future.

Sensitive Information includes, but is not necessarily limited to:

1. Driver's license or other state-issued identification number; social security number; unpublished telephone number; savings account, checking account, credit card or debit card number each when in combination with the security code, access code, password or pin for such account or card number;
2. "Nonpublic personal information" as defined in the Gramm-Leach-Bliley Act of 1999, as amended, and regulations issued pursuant thereto;
3. "Protected healthcare information" as defined in the Health Insurance Portability and Accountability Act of 1996 (HIPAA), as amended, and regulations issued pursuant thereto, and medical and healthcare information;
4. Private personal information as defined under a security breach notice law; and
5. Private personal information as defined under a law or regulation intended to provide for the protection of such private personal information; not including any lawfully available data accessible by the general public.