

Technology Professional Indemnity Proposal Form

The policy will only respond to claims and/or circumstances, which are first made against you and notified to the Insurers during the policy period. The policy will not provide cover for:

- Events that occurred prior to the retroactive date of the policy (if specified).
- Claims made after the expiry of the policy period even though the Wrongful Act giving rise to a claim may have occurred during the policy period.
- Claims notified or arising out of facts or circumstances notified under any previous policy or noted on the current proposal form.
- Claims made, threatened or intimated prior to the commencement of the policy period.
- Facts or circumstances in your knowledge prior to the policy period, which you know had the potential to give rise to a claim under the policy.

Disclosure

You must disclose to the Insurer all information which is material to it in deciding whether to issue insurance cover to you, including any facts or conduct which might lead to a claim being made against you. Failing to do so could affect your rights to indemnity.

Please note

Nothing in this proposal form should be interpreted to mean that coverage will be offered or that any items referenced in questions or answers to questions will be covered even if coverage is offered and bound. Some responses may require more space than that provided in the application itself. Please provide those responses on a separate page and attach it to this application.

If you do not understand any part of this document, please contact your broker before you sign it. You will be bound by the answers which are given, and by the information provided by you in the proposal form. It is in your interest to make sure that all information is properly understood. If you are in any doubt, discuss the issue with your broker or disclose the information to the Insurers.

Attachments

Before you return this form, have you included the following (please indicate yes or no)

| If the Proposer has been in business less than three years, please provide copies of resumes of all principals | Yes | No |
|--|-----|----|
| Copies of standard contract used with clients, independent contractors and content providers | Yes | No |
| Most recent financial statement | Yes | No |
| Marketing materials or brochures | Yes | No |

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| 1. Client information | |
|---|---|
| Proposer/Practice name | |
| VAT Registration Number Company Registration Number Date of commencement of practice As currently constituted Nature of business | Present Legal Constitution Sole Practitioner Partnership Incorporated Limited Co. Closed Corporation As initially established |
| Address | Address |
| Suburb | Suburb |
| Postal code Phone number | Postal code Cellular |
| Email | |
| For the remainder of this proposal form, "Proposer" refers individually and each person who is an officer, director, owner, partner or employee of th | |
| Owned Domain Names (All listed domain names/websites may or may o Owned domain names | not qualify for coverage) |
| | |
| Does the Proposers website(s) advertise services and products other tha If yes, please give brief details | n the Proposers own? Yes No |
| Please provide the total number of the Proposers employees Geographic area in which Proposer provides services Local National Regional International | |

Is the Proposer owned by, controlled by or affiliated with any other company?

If yes, identify the company and explain the relationship

| Name of Entity | Nature of Operations | % of Ownership | Coverage | Desired |
|------------------------------|--|------------------------------------|----------|---------|
| | | | Yes | No |
| | | | Yes | No |
| ast five years, has the Prop | ooser changed its name, acquired any busin | ess or merger or consolidated with | Yes | No |

Within the past five years, has the Proposer changed its name, acquired any business or merger or consolidated with any other entity?

If yes, please list below

| Entity Name | Date of Transaction | Type of Transaction | Did the Proposer assu any Assets/Liabilies |
|--|---|------------------------------------|---|
| | | | Yes No |
| | | | Yes No |
| Is the Proposer a member of any industry of If yes, please provide details | association? | | Yes No |
| | | | |
| 2. Independent Contractors | | | |
| Does the Proposer use independent control | actors for any activities the Proposer pe | rforms? | Yes No |
| If yes, what specific activities do they per independent contractors? | orm and what percentages of the Prop | osers revenues are derived from ac | tivities performed by |
| Describe what controls the Proposer has in | n place to ensure the quality of work by | independent contractors | |
| Does the Proposer require independent co Does the Proposer use a written contract w | | mniły insurance | Yes No Yes No |
| Please attach a copy of a standard contra | ct used with independent contractors | | |

Yes No

3. Revenue Information

Please provide the following information regarding the Proposers operations

| Fiscal Year End | Past Fiscal Year | Current Fiscal Year | Next Projected Fiscal Year* |
|---|------------------|---------------------|-----------------------------|
| Total Gross Revenue | RSA: R | RSA: R | RSA: R |
| | Foreign: R | Foreign: R | Foreign: R |
| | Total: R | Total: R | Total: R |
| Revenue tied to specific services that are Internet related | RSA: R | RSA: R | RSA: R |
| that are internet related | Foreign: R | Foreign: R | Foreign: R |
| | Total: R | Total: R | Total: R |
| Revenue tied to specific services | RSA: R | RSA: R | RSA: R |
| that are Hardware Product and Services | Foreign: R | Foreign: R | Foreign: R |
| | Total: R | Total: R | Total: R |

* The Next Projected Fiscal Year Revenues will be used as a guide to calculate the annual premium.

If Next Projected Fiscal Year Total Gross Revenue differs from Current Fiscal Year Total Gross Revenue by +/-20%, please explain:

4. Service

Describe in detail the activities the Proposer seeks to insure. **

 $\ensuremath{^{**}}$ This information will be used to develop a proposed Schedule of Insured Activities.

Please complete the following with regard to activities included above

| Activity/Service | Yes | No | % of revenues |
|--|-----|----|---------------|
| Software | | | |
| Custom Software | | | |
| Package Software | | | |
| Installation / Maintenance / Training / Support | | | |
| Programming | | | |
| Software VAR | | | |
| Hardware | | | |
| Component / Chip Design / Manufacturing | | | |
| Component Assembling | | | |
| Embedded Software Design / Installation | | | |
| Maintenance / Repair / Installation / Integration | | | |
| Hardware VAR | | | |
| Data / Facilities Services | | | |
| Data Processing / Warehousing / Mining / Management | | | |
| Server / Co-location – Hardware Facilities Management | | | |
| Backup Services / Archiving | | | |
| Technology / Internet / Telecommunications Consulting: | | | |
| System-Network Analysis / Design / Integration / Migration | | | |
| Outsourcing / Permanent-Temporary Placement | | | |
| Internet / E-Business | | | |

| Internet | | |
|---|--|--|
| Website Development / Maintenance / Hosting | | |
| ASP | | |
| ISP | | |
| Advertising / Promotional Design / Services | | |
| E-Commerce Services | | |
| Search Engines | | |
| Website Ownership | | |
| Content Provider / Aggregator / Publisher | | |
| Portal (including Chat / BB/ Blogs) | | |
| Other | | |

Please complete the following regarding the end use of services and activities:

| % | Medical / Healthcare | % | Credit Card Processing |
|---|---|---|------------------------------------|
| % | Government (including military / defense) | % | Entertainment |
| % | CAM/CAD/CAE Architectural / Engineering / Scientific | % | Banking / Funds Transfer / Finance |
| % | Security | % | Utilities |
| % | Emergency Applications (911 systems/emergency dispatch) | % | Other |

5. Internet

| Does the Proposer sell products on the Proposers website(s)? | Yes | No |
|---|-----|----|
| If yes, does the Proposer use a payment-processing intermediary | Yes | No |
| Is credit card information and/other personal information stored on a server that is connected to the Internet? | Yes | No |
| Does the Proposer have adequate capacity to accommodate subscribers and visitors to the Proposers site(s)? | Yes | No |
| Does the Proposer ever deep-link without permission (link to any page of another party's website deeper than its homepage)? | Yes | No |
| Does the Proposer ever frame content of third parties without the party's permission? | Yes | No |

What type of content is available on the Proposer's website(s)? (Tick all that apply

| Proposer's Information | Promotions | "How To" |
|------------------------|--------------------|-----------------|
| Software | Adult Only | Digital Music |
| Law/Legal | Sports | Comedy |
| Educational | Medical/Healthcare | Dating Service |
| Commentary/News | Financial | Online Gambling |
| Religious/Cultural | Advertising | Games/Contests |
| Children's | Blogging | Twitter |
| Other | | |
| | | |

Does the Proposer always follow an established procedure for detecting or editing controversial, offensive, or infringing material from the Proposers website or Internet service?

Is there an immediate take down policy

Does the Proposer use content developed by third parties, such as text, videos, graphics, music, etc. on the Proposers website?

If yes, identify the company and explain the relationship

| Please attach a copy of the contract used with third party content providers. | |
|--|--------|
| Does the Proposer always obtain the documented rights to use the intellectual property of third parties (including copyright and trademark)? | Yes No |
| Does the Proposer edit, revise or review content created or provided by third parties? | Yes No |

Yes

Yes

Yes

No

No

No

6. Quality Control Procedures

What does the Proposer see as its greatest potential exposures arising out of the activities for which it is seeking coverage?

What safeguards does the Proposer employ to avoid claims or reduce the Proposers exposures?

How does the Proposer inform customers of problems if discovered?

| Does the Proposer have a written complaint resolution policy or procedure? | Yes | No |
|--|-----|----|
| Does the Proposer perform quality control audits? | Yes | No |
| If yes, how frequently are audit performed? | | |

| Does the Proposer have a formal technology and computer systems training program, including a review of all security procedures, for all employees performing proposed Insured Activities? | Yes | No |
|--|-----|----|
| Does the Proposer have and follow a written technology and computer systems security policy? | Yes | No |
| Does the Proposer provide training for the Proposers clients? | Yes | No |
| Does the Proposer have Business Continuity / Disaster Recovery plans in place for all critical business processes? | Yes | No |
| Does the Proposer perform background checks, including credit & criminal history, on new programming or security employees, independent contractors / consultants? | Yes | No |
| Has the Proposer experienced a virus or a security breach? | Yes | No |

If yes, what steps have been taken to prevent further security vulnerabilities?

| Does the Proposer audit or assess the security of the Proposers network at least once a year? | Yes | No |
|--|-----|----|
| If yes, are all recommendations addressed? | Yes | No |
| Are firewalls and anti-virus software used to prevent unauthorised access connections from internal networks and computers systems to external networks? | Yes | No |
| Does the Proposer use encryption technology? | Yes | No |
| Has the Proposer implemented a user permission and password management policy? | Yes | No |
| Does the Proposer outsource any of the following critical network system functions? (tick all that apply) | | |

| Hosting Facility | Co-Location Facility |
|--|-----------------------|
| Managed Security Service Provider (MSSP) | Data Storage Facility |
| Other (please specify) | |

| Has the Proposer performed a trademark search on the Proposers domain name(s)? | Yes | No |
|---|--------|-------|
| Does the Proposer sell or share information gathered from customers or others? | Yes | No |
| If yes, does the Proposer notify and obtain the consent of customers or others prior to selling or sharing? | Yes | No |
| If yes, by what means? Opt-out | Opt-in | Other |

| | Client | Rand value of Contract | Length of Contract | Types of Products/Services |
|----|--------|------------------------|--------------------|----------------------------|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |
| 5. | | | | |

| Does the Proposer use a standard written contract or agreement with all clients? | | | | No |
|--|---|-----|--|----|
| If standard contracts are not utilised at all times, what percentage of time does the Proposer use non-standard contracts? | | | | % |
| Does legal counsel review all contracts? | | Yes | | No |
| If no, what percentage of total contracts are reviewed? | | | | % |
| Does legal counsel review modifications to standard contracts? | | Yes | | No |
| What is the Rand value of the Proposers contract? Average Largest | R | | | |
| What is the length of the Proposers contracts? Average Longest | | | | |

Do the Proposers contracts contain any of the following provisions?

| Hold-h | harmless / indemnification wording to Proposers favour |
|---------|--|
| Limitat | tion of liability / Disclaimers |
| Hold-h | harmless / indemnification wording to client's favour |
| Statem | nent of work specifications |

Please attach a copy of the contract used with third party content providers.

| If the Proposer is a value-added reseller of software/hardware, is the manufacturer still in business and does the manufacturer continue to support products they have manufactured? | Yes | No |
|--|-----|----|
| Does the Proposer continue to support all software/hardware that the Proposer has developed and/or distributed? | Yes | No |
| Do clients always provide written acceptance of the systems and/or software after the production or implementation? | Yes | No |
| Is a standard test plan followed by the Proposer for all system and/or software design and development work (i.e. alpha, beta prototype development, etc.)? | Yes | No |
| Are clients responsible for determining the accuracy of test results? | Yes | No |
| Does the Proposer retain design, development, and testing documentation for the life of the systems and/or software? | Yes | No |
| If no, how long is this information retained by the Proposer? | | |
| Has the Proposer had a product recalled in the past three years? | Yes | No |

If yes, please explain

| 7. Current/Prior Insurance | e | | | | |
|------------------------------|---------------------------|------------------------|------------|---------|------------------------------|
| Policy Period | Carrier | Limits | Deductible | Premium | Claims-made or Occurrence |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| What is the retroactive do | ate of the current policy | ? | | | |
| Is any extended reporting | g period currently in for | ce? | | | Yes No |
| If yes, provide the duration | on an expiration date of | the extended reporting | period | | |

Has the Proposer ever applied for Professional Liability coverage and been denied, cancelled or non-renewed?

Does the Proposer maintain General Liability Coverage?

| Yes | No |
|-----|----|
| Yes | No |

| Insurer | |
|---|-----------------------|
| Limits | |
| Expiration date | |
| Does the Proposer's General Liability coverage include: | |
| Personal Injury/Advertising Injury | Yes No |
| Products/Defective Workmanship | Yes No |
| Professional Services Exclusion | Yes No |
| | |
| 8. Desired Limits / Deductible Options | |
| Desired Policy Limits | R |
| Each Erroneous act | R |
| Aggregate Limit | R |
| Desired Deductible | R |
| 9. History | |
| To the best of the Proposer's knowledge, in the last five years has the Proposer transmitted a computer virus to a third party? | Yes No |
| In the last five years have any of the Proposers customers: | |
| Made allegations or complained about the performance, non-performance, or timelines of the Proposers products/services? | Yes No |
| Refused to pay or stopped paying fees or dues due to allege problems with the Proposer's services / products? | Yes No |
| Requested a refund due to alleged problems with the Proposer's products/services? | Yes No |
| In the past five years, has the Proposer sued any of its clients for non-payment? | Yes No |
| If yes, advise the number of times this has occurred | |
| In the last twelve months | |
| In the last five years | |
| In these instances, was the Proposer counter-sued? | Yes No |
| In the past five years, have any officers, principals, partners, directors, or professional employees of the Proposer had their professional license(s) or certification(s) suspended or revoked? | Yes No |
| If yes, please explain | |
| | |
| Is the Proposer aware of any actual or alleged fact, circumstance, situation, error or omission, which can reasonably be expected to result in a Claim, suit or proceeding being made against the Proposer? | Yes No |
| The policy for which the Proposer is applying, if issued, will not insure any Claims that can reasonably be expected to ar or alleged fact, circumstance, situation, error or omission known to any Proposer before the Inception Date of the policy | |
| Has the Proposer or any of the Proposers predecessors in business, affiliates, or past or present: partners, owners, officers, sales persons or employees have been investigated and/or cited by any regulatory body, certifying body or other governmental entity? | Yes No |
| Have any Claims, suits or proceedings been brought during the past five years against the Proposer or Proposer's prede- cessors in business, affiliates, or past or present: partners, owners, officers, sales persons or employees? | Yes No |
| The policy for which the Proposer is applying, if issued, will not insure any Claims made against the Proposer prior to the policy or any subsequent claims, suits or proceedings arising therefrom. | Inception Date of the |
| If any of the answers to questions above are "Yes", have all matters been reported to appropriate insurers? | Yes No |

If proposer has responded "yes" to questions above, please provide the following information:

A full description including damages alleged

Current status

Date the insurance company was put on notice

Amounts of: reserves, legal expenses paid; and settlements or judgements

Steps implemented to prevent similar claims in the future

Claims made

Technical Professional Indemnity Insurance policies are underwritten on a "Claims Made" basis. This means that;

- 1. In order for a claim to qualify for indemnity a policy must be in force when the claim is first made against you. (In terms of the policy conditions you are obliged to notify Insurers as soon as you become aware of any circumstances which may lead to a claim. Any actual claim which then materialises would be deemed to be a claim under the policy which was in force at the time when the circumstance was first notified).
- 2. The cause of action giving rise to the claim must have taken place on or after the "retro-active date" shown in the Schedule of the policy.
- 3. If the policy has lapsed there will be no cover notwithstanding the fact that the policy may have been in force at the time when the cause of action occurred giving rise to the claim. It is therefore important to renew the policy annually. If the practice ceases it is recommended that run-off cover be taken for a minimum of three years.

Retro-Active date

The date on or after which any claim against you will be indemnified in terms of the policy. This date is normally fixed as being the date on which the cover was first taken and would remain unaltered for the purposes of subsequent renewals. When cover is first taken additional retro-active cover may be offered by Insurers subject to certain conditions and premium loadings.

Declaration

I/We declare that the statements and particulars in this proposal are true and that I/ We have not misstated or suppressed any material facts. I/We agree that this proposal, together with any other information supplied by me/ us shall form the basis of any contract of insurance effected thereon. I/ We undertake to inform the Insurers of any material alteration to these occurring before/ during/ after completion of the Contract of Insurance.

| Signed at | dated |
|-----------|-----------|
| Full name | |
| | |
| Signature | |

Cooling Off Rights

You enjoy a period of 14 (Fourteen) days ("cooling-off period") from receipt of the Policy document following the inception date of the insurance agreement if taken or from the effective date of any variation thereof, during which you may rescind the agreement and provided that you have not claimed any benefit, are not in receipt of a claim made against you or reported any claim to the Insurer, the insurance agreement is annulled and you will be entitled to a refund of Premium paid.

The Insurer will give effect thereto and return premiums due to you less an administration charge within 30 (Thirty) days of the annulment.