

NOTICE: This is an application for a claims made policy (and for certain accounts, claims made and reported), and the limit of liability under any policy to be issued in response hereto shall include both the indemnity payments for claims and payment of claim and defense expenses, as defined in the policy.

Please note that the defense-cost provision of this policy stipulates that the limits of liability may be completely exhausted by the cost of legal defense. Any deductible or retention shall apply to investigation expense and defense costs as well as indemnity.

All questions in this application must be answered truthfully and completely for all persons or organizations applying for insurance under this application. All applicants must complete [Section I - General Information and Products and Services Errors and Omissions](#), and, depending upon the nature of your business operations or the types of insurance you wish to purchase, you may also have to complete other Sections, as described below.

The titles of each are:

Section I General Information

Section II Insurance for Prior Acts of an Acquired Organization

Some questions in each section of this application may not apply to your organization. Where this is the case, please mark "not applicable"(N/A). If the answer to a question is none, state "none" or "0". If more space is required to answer a question completely, please provide a separate attachment and identify the question to which it pertains.

Section I - General Information

Applicant Information

Applicant Name: _____

Address: _____

Mailing Address (if different): _____

City: _____

State: _____

ZIP Code: _____

Country: _____

E-mail Address: _____

Requested Effective Date: _____

Section II Insurance for Prior Acts of an Acquired Organization

The information requested herein is only in respect to the specific acquisition under consideration for this additional insurance, and you have assumed the liabilities (i.e. responsibility for prior acts) of the assets, businesses or organizations acquired.

This section may be used for an acquisition made prior to the inception of the effective date of this insurance or for an acquisition made during the period of this insurance.

A separate section must be completed for each acquisition to be considered.

The words "you" or "your" refer to the buyer's response to questions relating to the assets, businesses or operations acquired.

As part of this application, attach copies of:

- The executed purchase/sale/acquisition transaction agreements, including all schedules, exhibits and disclosure statements
- Letters of intent, prospectus, side agreements and letters relating to the transaction
- The acquired company's E & O, media and any other applicable professional-liability policies, including all endorsements attached thereto

Describe the transaction:

- Total purchase or merger with another organization
- Purchase of all or substantially all assets of the acquired organization
- Purchase or sale of less than substantially all assets of the acquired organization

Estimated Transaction Closing Date _____

Acquired Company's Information

Name: _____
 Address: _____
 City: _____
 State: _____
 ZIP Code: _____
 Country: _____
 E-mail Address: _____

List the names of all subsidiaries of the acquired company in the space provided below.

For each subsidiary that the acquired company purchased, list the year purchased and the nature of each transaction.

Name	Date Acquired	Type – Assets Only/Assets and Liabilities

COVERAGE REQUEST

Insurance Protection	Requested Coverage		Limits of Insurance
Products or Services Financial Injury (E & O)	Yes	No	
Miscellaneous Professional Liability	Yes	No	
Intellectual Property Infringement Injury	Yes	No	
Personal or Media Injury	Yes	No	
Privacy and Information Security Injury	Yes	No	
Other	Yes	No	

Acquired Company's Prior Insurance Information Summary

Policy Period	Retroactive Date	Insurer	Premium	Limits of Insurance	Deductibles/Retention

Acquired Company's Earliest Retroactive Date _____

Has the acquired company purchased a Supplemental Reporting Period on any applicable claims made policy forms? Yes No

If Yes, please provide details in the space provided below.

Acquired Company's Historical Revenue Totals

Begin with the year of the earliest retroactive date of coverage for any applicable claims made policy pertaining to products, services or professional advice.

Year	Annual Revenue

Types of Products and Services, Industries Served and Estimated Revenue

Types of Products and Services	Industries Served	Business or Consumer Use	Historic Distribution %
Prepackaged Software			%
Custom Software			%
Enterprise Applications – ERP, CRM, SCM			%
Computer or Networking Hardware Manufacturing			%
ISP, ASP or Web Site Hosting			%
Consulting			%
Managed Security Consulting			%
Health Information Technology			%
Process Control Software			%
System Integration, Value-Added Reselling			%
Data or Content Retrieval or Aggregation			%
Web Site Design			%
Search Engine Portals			%
Video Game or Other Media Content Development			%
Credit Card or Payment-Processing Services, Including Related Hardware or Software Products or Applications			%
Mobile Phones, Devices or Products and/or Related Software Applications			%
Operator of Auction, File-Sharing or Social-Networking Web Sites			%
Licensed Professional Services; e.g. Attorneys, Medical or other			%

How many distinct products or services does the acquired company offer? 1-3 4-6 More than 6

How many of the acquired company's customers represented 10 percent or more of their total revenue based on the most recent audited period?

0 1 2 3 4 5

Please provide more detailed information about these customers:

Customer	Revenue	Product or Service

Contractual Management

Does the value of any performance-based contract, purchase order or agreement exceed \$2.5M? Yes No

Provide the following information for the acquired company's five largest contracts, purchase orders or agreements that you will assume.

Customer	Contract Amount	Product or Service	Duration

Does the acquired company limit your potential liability in all contracts for breach of its security? Yes No

Does the acquired company have a formalized process to evaluate the financial conditions of its customers and suppliers? Yes No

If Yes, please describe that process in the space provided below.

Acquired Company's Quality-Control and Customer-Support Functions

Do the quality-control procedures include the following?

Written and formalized quality-control program	Yes	No	N/A
Alpha testing	Yes	No	N/A
Beta testing	Yes	No	N/A
Formal customer-acceptance procedure	Yes	No	N/A
Systems-development methodology in writing	Yes	No	N/A
Formal product-recall plan	Yes	No	N/A
Formal policy for documenting and responding to customer complaints or requests for changes or fixes	Yes	No	N/A
Use of static analyzers or other forensic methodologies to assist in identifying code vulnerabilities	Yes	No	N/A

Do the acquired company's products/services comply with any accepted industry standards?

ISO 9000 UL/CSA ANSI Other _____

How long are development documents, contracts and other critical documents retained?

Months Years Unlimited N/A

Number of Months: _____

Number of Years: _____

Does the acquired company require that its information-security officer or development QC manager ensure that all products are continually evaluated throughout their life cycle for known security vulnerabilities? Yes No N/A

Does the acquired company have at least two forms of customer or product support? Yes No N/A

Information Security

During the due-diligence process, did your review and analysis include the following?

- | | | |
|---|-----|--------|
| • Computer infrastructure and architecture | Yes | No |
| • Computer-use policies and protocols | Yes | No |
| • Computer-system compatibility/integration | Ye | s No |
| • Internally developed software | Yes | No |
| • Information-security policies, procedures and protocols | Yes | No |
| • Security breaches | | Yes No |
| • Business Continuity and Disaster Recovery Plan | | Yes No |

Is the acquired company's information-security officer (or other position noted) accountable to the Board of Directors or senior management for all security-related issues, including your policies, procedures, products and services? Yes No

Does the acquired company have a formalized information-security policy that dictates the protocols that control access to or use of all critical data, processes or information systems for all authorized users, including business partners and third parties? Yes No

If Yes, was that policy subject to internal or external audit review? Yes No

If Yes, is that report available for review? Yes No

Do any of the acquired company's services (including hosting or Software as a Service) involve processing, transmitting or storing nonpublic personal information or business confidential information for customers in the following areas?

- | | | |
|---|-----|----|
| Banking or finance | Yes | No |
| Education | Yes | No |
| Health care | Yes | No |
| Health information technology | Yes | No |
| Retail | Yes | No |
| Human resources management | Yes | No |
| Customer relationship management | Yes | No |
| Payment card industry/data security standards | Yes | No |
| E-commerce applications | Yes | No |
| E-marketing applications | Yes | No |

[If you answered No to each category in the questions above, you have finished the Information Security portion of this section and may proceed directly to the Intellectual Property and Media Liability section. If you answered Yes to any of the categories shown above, please continue in this section and answer all the applicable questions.](#)

Is the acquired company certified to any recognized information security standard? Yes No

If Yes, which standards?

Does the acquired company have a written policy to grant least-privileged access to nonpublic personal or business confidential information? Yes No

Is any nonpublic personal or business confidential information stored on public Web servers? Yes No

Did the acquired company have a process to evaluate the business-impact analysis of:

- Internal operations Yes No
- Business partners Yes No
- Vendors Yes No

If Yes, did that process take the following vulnerabilities into account?

- Outside attacks; e.g. hackers Yes No
- Rogue employees (exceeding authorized access or unauthorized use) Yes No
- Human element mistakes Yes No
- Technology failures Yes No

Did the acquired company have penetration testing performed on its network? Yes No

Did the acquired company have a process to mitigate the impact of vulnerabilities identified in the business impact analysis and penetration testing? Yes No

Describe the type or nature of customer data that the acquired company is legally responsible for:

- Money Securities Customer information
- Credit card data Trade secrets Employment records/employee benefits
- Business plans/business confidential information
- Intellectual property; e.g. copyrights, trademarks or patents

Did the acquired company have an officer or senior manager directly responsible for:

- Ensuring that firewalls and Intrusion Detection Systems (IDS) have been properly configured and installed throughout your network? Yes No
- Establishing protocols for wireless access points within the networked environment? Yes No
- Shutting down systems in case of a network or internal attack? Yes No
- Instituting a centralized patch-management program including timely vulnerability evaluations, network distribution, compliance checking and escalation procedures? Yes No
- Limiting access to LANs or WANs, mail servers, Web servers, workstations, and other critical information and applications? Yes No

Does the acquired company have a policy or process to specifically identify all federal, state or local laws; e.g. Health Insurance Portability and Accountability Act of 1996, California SB 1386 or European Union Privacy Directive, pertaining to handling (in transit or at rest) of customer data for which it is legally responsible? Yes No

Does the acquired company or its designated representative monitor changes to data breach-notification laws in all states and countries where services are offered? Yes No

Do any of the acquired company's operations or services require compliance with payment card industry/data security standards? Yes No

If Yes, are you compliant with the current standards? Yes No

What is the date of the last audit? _____

Are internal or external findings available for review? Yes No

Does the acquired company have written procedures addressing:

- Internet usage Yes No
- E-mail Yes No
- Portable devices Yes No
- Authentication/password Yes No
- Privileged access Yes No
- Patch management Yes No
- Backup and remote storage Yes No
- Wireless Yes No
- Document retention and destruction (including media-disposal procedures) Yes No
- Facilities management (physical security) Yes No
- Utilities management (cooling, power, fire protection, etc.) Yes No

Have all authorized users received specific training regarding information-security policies and procedures? Yes No

Prior to hiring any new programming, technical or security employees, does the acquired company have a policy to confirm:

- Educational credentials Yes No
- Credit history Yes No
- Criminal records Yes No
- Employment history Yes No

Do the acquired company's employment policy and work-for-hire contracts specifically address duties and obligations relating to information security? Yes No

Do the acquired company's policies (for employees and third parties with computer access) include immediate revocation of all access to systems, facilities and networks? Yes No

Does the acquired company outsource any business functions involving mission data, processes or information systems to a third-party vendor? Yes No

If Yes, please describe which functions have been outsourced and to whom.

Function	Vendor Name and Address

Does the acquired company require any third-party vendors who have in their possession any nonpublic personal or business confidential information for which you are responsible to receive written permission prior to transferring such data to any other party? Yes No

Does the acquired company regularly conduct security audits or require evidence of security audits from its critical business partners? Yes No
 If Yes, are those audits available for review? Yes No

Intellectual Property and Media Liability

Do you have a formal due-diligence process pertaining to the acquisition of intellectual property? Yes No

Does that process include the following?

- Identification of all IP assets involved with the sale Yes No

- | | | |
|---|-----|----|
| • Certification of ownership title of all IP assets | Yes | No |
| • Analysis of all legal opinions relating to IP assets | Yes | No |
| • Review of any employment contracts pertaining to ownership of IP assets | Yes | No |
| • An audit of the IP clearance procedures | Yes | No |
| • Evaluation of all IP license obligations that survive the sale | Yes | No |

Have you sold any companies during the past three years?	Yes	No
If "yes", do you have written contracts relating to any of the IP assets retained?	Yes	No

Has the acquired company received any notice or warning, whether written or oral, with respect to any possible or actual intellectual property right claim or suit?	Yes	No
If yes, please provide details about the type, date and circumstances of the warning.		

Historical Information

In the past ten (10) years, has the acquired company been sued or threatened with suit for any act, error or omission relating to your products or services?	Yes	No
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In the past ten (10) years, have any of the acquired company's products been recalled from use?	Yes	No
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Within the past three years, has the acquired company been sued by any customer for nonpayment of contracts?	Yes	No
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In the past ten (10) years, has the acquired company been involved in any legal action or proceeding, whether past or pending, that involves an intellectual property right dispute or libel, slander or other forms of defamation or invasion of the rights of privacy or publicity?	Yes	No
If Yes, please provide details about type, date and circumstances of each suit.		

In the past (10) years, has the acquired company been subject to any administrative, civil or criminal investigation or litigation by any governmental or regulatory authority?	Yes	No
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Are you or the acquired company's officers aware of any act, error or omission, unresolved contract dispute, or any other circumstance that may reasonably be expected to result in a claim or suit to which this insurance applies?	Yes	No
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Have you received any notice or warning, whether written or oral, with respect to any possible or actual intellectual property right claim against you?	Yes	No
If Yes, please provide details about type, date and circumstances of each suit.		

APPLICANT ACKNOWLEDGEMENT

NOTICE TO APPLICANT - PLEASE READ CAREFULLY.

INFORMATION OR DATA CONTAINED IN OR SUBMITTED IN CONNECTION WITH THIS APPLICATION (OR OTHERWISE TO ANY OF THE MEMBER INSURERS OF CHUBB GROUP OF INSURANCE COMPANIES ("CHUBB") IN CONNECTION WITH THE UNDERWRITING PROCESS) DOES NOT CONSTITUTE NOTICE OF AN OCCURRENCE, WRONGFUL ACT, CLAIM, SUIT OR OTHER CIRCUMSTANCE AND DOES NOT SATISFY ANY OF THE REPORTING NOTIFICATION OR OTHER PROVISIONS OF ANY POLICY. ALL SUCH NOTICES MUST BE GIVEN SEPARATELY IN ACCORDANCE WITH THE APPLICABLE POLICY CONDITIONS.

For the purposes of this application, the above-signed officer of all person(s) and entity(ies) proposed for this insurance declares and acknowledges by clicking where indicated below that he/she has reviewed this application and the statements contained therein with his/her Chief Executive Officer, Chief Financial Officer, Chief Operating Officer or their equivalents and that, to the best of their knowledge and belief, after reasonable inquiry, the statements in this application, and in any attachments, are true and complete. Chubb is authorized to make any inquiry in connection with this application. Signing this application shall not constitute a binder or obligate Chubb to complete this insurance, but it is agreed this application shall be the basis upon which a policy may be issued.

If the statements in this application or in any attachment change materially before the effective date of any proposed policy, the applicant must notify Chubb, and Chubb may modify or withdraw any quotation.

You understand that the limit of liability under any policy to be issued in response hereto shall include both indemnity payments for claims and payment of claim and defense expenses, as defined in the policy.

PLEASE NOTE: ONLY DULY APPOINTED AGENTS OF CHUBB AND LICENSED BROKERS ARE AUTHORIZED TO SOLICIT APPLICATIONS FOR INSURANCE. AGENTS AND BROKERS ARE NOT AUTHORIZED TO BIND INSURANCE. NO INSURANCE SHALL BE PROVIDED UNLESS CHUBB ACCEPTS THE APPLICATION AND BINDS THE INSURANCE.

By signing below, applicant hereby certifies that the statements made and the information and data supplied herewith are true, accurate and complete.

<u>Authorized Signature of Applicant</u>		<u>Date</u>	
<u>Print Name</u>		<u>Title</u>	
Applicant		Authorized Agent (Please Print Name)	
Authorized Agent (Signature)		Title	Date
Submitted By (Insurance Agent)		Insurance Agency	
Agent License No. (For non-admitted placements a copy of valid surplus lines license will be required)			
Address (No., Street, City, State, and ZIP Code)			

NOTICE TO APPLICANT - PLEASE READ CAREFULLY.

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON, FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME AND SUBJECTS SUCH PERSON TO CRIMINAL AND CIVIL PENALTIES, INCLUDING BUT NOT LIMITED TO FINES, DENIAL OF INSURANCE BENEFITS, CIVIL DAMAGES, CRIMINAL PROSECUTION AND CONFINEMENT IN STATE PRISON.

APPLICABLE IN:

ARKANSAS

ANY PERSON WHO KNOWINGLY PRESENTS FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT, OR KNOWINGLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE IS GUILTY OF A CRIME AND MAY BE SUBJECT TO FINES AND CONFINEMENT IN PRISON.

COLORADO

IT IS UNLAWFUL TO KNOWINGLY PROVIDE FALSE, INCOMPLETE, OR MISLEADING FACTS OR INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING OR ATTEMPTING TO DEFRAUD THE COMPANY. PENALTIES MAY INCLUDE IMPRISONMENT, FINES, DENIAL OF INSURANCE AND CIVIL DAMAGES. ANY INSURANCE COMPANY OR AGENT OF AN INSURANCE COMPANY WHO KNOWINGLY PROVIDES FALSE, INCOMPLETE, OR MISLEADING FACTS OR INFORMATION TO A POLICYHOLDER OR CLAIMANT FOR THE PURPOSE OF DEFRAUDING OR ATTEMPTING TO DEFRAUD THE POLICYHOLDER OR CLAIMANT WITH REGARD TO A SETTLEMENT OR AWARD PAYABLE FROM INSURANCE PROCEEDS SHALL BE REPORTED TO THE COLORADO DIVISION OF INSURANCE WITHIN THE DEPARTMENT OF REGULATORY AGENCIES.

DISTRICT OF COLUMBIA

WARNING: IT IS A CRIME TO PROVIDE FALSE OR MISLEADING INFORMATION TO AN INSURER FOR THE PURPOSE OF DEFRAUDING THE INSURER OR ANY OTHER PERSON. PENALTIES INCLUDE IMPRISONMENT AND/OR FINES. IN ADDITION, AN INSURER MAY DENY INSURANCE BENEFITS IF FALSE INFORMATION MATERIALLY RELATED TO A CLAIM WAS PROVIDED BY THE APPLICANT.

FLORIDA

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO INJURE, DEFRAUD, OR DECEIVE ANY INSURER FILES A STATEMENT OF CLAIM OR AN APPLICATION CONTAINING ANY FALSE, INCOMPLETE, OR MISLEADING INFORMATION, IS GUILTY OF A FELONY OF THE THIRD DEGREE.

KENTUCKY

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE CONTAINING ANY MATERIALLY FALSE INFORMATION OR CONCEALS, FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME.

LOUISIANA

ANY PERSON WHO KNOWINGLY PRESENTS A FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT OR KNOWINGLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE IS GUILTY OF A CRIME AND MAY BE SUBJECT TO FINES AND CONFINEMENT IN PRISON.

MAINE

IT IS A CRIME TO KNOWINGLY PROVIDE FALSE, INCOMPLETE OR MISLEADING INFORMATION TO INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING THE COMPANY. PENALTIES MAY INCLUDE IMPRISONMENT, FINES OR A DENIAL OF INSURANCE BENEFITS.

MARYLAND

ANY PERSON WHO KNOWINGLY OR WILLFULLY PRESENTS A FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT OR WHO KNOWINGLY OR WILLFULLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE IS GUILTY OF A CRIME AND MAY BE SUBJECT TO FINES AND CONFINEMENT IN PRISON.

NEW JERSEY

ANY PERSON WHO INCLUDES ANY FALSE OR MISLEADING INFORMATION ON AN APPLICATION FOR AN INSURANCE POLICY IS SUBJECT TO CRIMINAL AND CIVIL PENALTIES.

NEW MEXICO

ANY PERSON WHO KNOWINGLY PRESENTS A FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT OR KNOWINGLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE IS GUILTY OF A CRIME AND MAY BE SUBJECT TO CIVIL FINES AND CRIMINAL PENALTIES.

NEW YORK

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME AND SHALL ALSO BE SUBJECT TO A CIVIL PENALTY NOT TO EXCEED FIVE THOUSAND DOLLARS AND THE STATED VALUE OF THE CLAIM FOR EACH SUCH VIOLATION.

OHIO

ANY PERSON WHO, WITH THE INTENT TO DEFRAUD OR KNOWING THAT HE IS FACILITATING A FRAUD AGAINST AN INSURER, SUBMITS AN APPLICATION OR FILES A CLAIM CONTAINING A FALSE OR DECEPTIVE STATEMENT IS GUILTY OF INSURANCE FRAUD.

OKLAHOMA

WARNING: ANY PERSON WHO KNOWINGLY, AND WITH INTENT TO INJURE, DEFRAUD OR DECEIVE ANY INSURER, MAKES ANY CLAIM FOR THE PROCEEDS OF AN INSURANCE POLICY CONTAINING ANY FALSE, INCOMPLETE OR MISLEADING INFORMATION IS GUILTY OF A FELONY.

OREGON

ANY PERSON, WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON, FILES AN APPLICATION FOR INSURANCE CONTAINING ANY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING INFORMATION CONCERNING ANY MATERIAL FACT THERETO, MAY BE GUILTY OF AN INSURANCE FRAUD.

PENNSYLVANIA

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME AND SUBJECTS SUCH PERSON TO CRIMINAL AND CIVIL PENALTIES.

TENNESSEE, VIRGINIA AND WASHINGTON

IT IS A CRIME TO KNOWINGLY PROVIDE FALSE, INCOMPLETE OR MISLEADING INFORMATION TO INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING THE COMPANY. PENALTIES INCLUDE IMPRISONMENT, FINES AND DENIAL OF INSURANCE BENEFITS.

RHODE ISLAND AND WEST VIRGINIA

ANY PERSON WHO KNOWINGLY PRESENTS A FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT OR KNOWINGLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE IS GUILTY OF A CRIME AND MAY BE SUBJECT TO FINES AND CONFINEMENT IN PRISON.

This is an application for a policy that may be issued in a state that requires us to advise you that if available, the following condition is added to your policy: All references in the policy to "spouse" include a party to a civil union or domestic partnership recognized under the applicable law of the jurisdiction having authority.

This application is protected by copyright laws and should not be reproduced or redistributed without the express written consent of Chubb, A Division of Federal Insurance Company. All rights reserved.