



Cyber

Marine Cyber Insurance Application Form





Solely as respects claims-made liability coverages under the policy for which this Application is being submitted: This insurance policy provides coverage on a claims-made and reported basis and applies only to claims first made against the insured during the policy period or any applicable extended reporting period and reported to the insurer as set forth in the reporting of claims and events section.

"Applicant" refers individually and collectively to all proposed insureds. All responses shall be deemed made on behalf of all proposed insureds.

"Application" means each and every signed application, any attachments or supplements to such applications, other written materials submitted therewith or incorporated therein and any other documents, including any warranty letters or similar documents, submitted in connection with the underwriting of this policy or any other policy issued by the Insurer or any of its affiliates providing the same or similar coverage or of which this policy is a renewal or replacement, or which it succeeds in time.

This Application and all materials submitted herewith shall be held in confidence.

The submission of this Application does not oblige the Applicant to buy insurance nor is the Insurer obligated to sell insurance or to offer insurance upon any specific terms requested.

Instructions

- Respond to all questions completely, leaving no blanks. Check responses when requested
- If space is insufficient, continue responses in the free text box at the end of this Application
- This Application must be completed, dated, and signed by an authorized officer of the entity



Business Overview

Business/client name

Business website URL

Main business address

Please provide a brief description of the business

Gross annual revenue

From last complete financial year:

Current year forecast:

Next year forecast:

What is the main source of annual revenue?

Do you have any other business activities outside of shipping?

E.g. hotels, road/aviation transport, manufacturing

Number of vessels in current fleet

Please provide details of any mergers, acquisitions or disposals in the last 12 months (if none, state not applicable).

Please provide any details of any mergers, acquisitions (inclusive of vessels) or divestitures planned in the next 12 months (if none, state not applicable).

Is cover intended for insured owned vessels only? (i.e. no third-party/managed vessels)?

YES

NO

If no, please provide details.



Cyber Security

Key Questions

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| 1. Do you patch critical vulnerabilities (as per CVSS scoring 9.0 – 10.0) for all onshore IT assets within 7 days of the public disclosure/vendor release of the patch or advisory? | YES | NO | COMMENT: |
| 2. Is an Endpoint Detection and Response (EDR) tool actively deployed and managed to at least 75% of endpoints or servers, and configured to block malicious activity for onshore IT assets? | YES | NO | COMMENT: |
| 3. Is all critical data on-board vessels and at onshore assets backed up at least weekly? | YES | NO | COMMENT: |
| 4. Is multifactor authentication (MFA) mandatory for all remote network access to onshore IT assets? | YES | NO | COMMENT: |
| 5. Can all business-critical data and systems be fully recovered within 10 days? | YES | NO | COMMENT: |
| 6. Are you compliant with International Safety Management (ISM) Code for Cyber? | YES | NO | COMMENT: |



7. Are your vessel networks segregated from every other vessel in the fleet? YES NO COMMENT:

Best Practice Questions

8. Do you address and patch known exploited critical vulnerabilities (as per CVSS scoring 9.0 – 10.0) for all onshore IT assets within 48 hours and on all vessel assets where practically possible within 48 hours? YES NO COMMENT:

9. Does the organization implement measures to exclusively permit the operation of approved applications (i.e. application allow-listing), to hinder the execution of malicious or unwanted programs? YES NO COMMENT:

10. Is all network traffic between systems blocked by default unless specifically required (e.g. RDP access between onshore IT assets)? YES NO COMMENT:

11. Is data both onboard the vessels and at onshore assets backed up on a weekly basis? YES NO COMMENT:

12. Are your backups encrypted? YES NO COMMENT:



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| 13. Are the backups disconnected from and inaccessible through the business network? (i.e. are backups stored off the network?) | YES | NO | COMMENT: |
| 14. Do you segment engineering and bridge networks from recreation networks? | YES | NO | COMMENT: |
| 15. Is MFA required to access vessel networks from onshore IT assets? | YES | NO | COMMENT: |
| 16. Is MFA in place to access privileged accounts? | YES | NO | COMMENT: |
| 17. Are IT and control system security aspects incorporated into the ships' safe operations procedures? | YES | NO | COMMENT: |
| 18. Are security controls like firewalls installed on all key equipment onboard the vessels? | YES | NO | COMMENT: |



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| 19. Are USB port blockers installed on all key equipment onboard the vessels to prevent unauthorized access or data transfer? | YES | NO | COMMENT: |
| 20. Is automatically updated anti-virus software installed on all end-user devices? | YES | NO | COMMENT: |
| 21. Do you have a documented Business Continuity Plan which addresses cyber events, both on-board vessels and at onshore assets, that has been tested in the past year? | YES | NO | COMMENT: |
| 22. Do you retain paper maps and charts onboard the vessels to utilize in the event of system outage(s)? | YES | NO | COMMENT: |
| 23. Do you have a documented Disaster Recovery Plan which addresses cyber events, both on-board vessels and at onshore assets, that has been tested in the past year? | YES | NO | COMMENT: |
| 24. Do all employees (crew and office staff) receive regular security awareness training that covers phishing and other cyber threats? | YES | NO | COMMENT: |



Email

25. Do you utilize Cloud-based email, such as M365 or Google Workspace? Which do you use?

a. If M365, do you utilize M365 Advanced Threat Protection? YES NO COMMENT:

b. If Google Workspace, do you utilize Google Workspace Advanced Security and Threat Prevention? (This includes Gmail's Advanced Phishing and Malware Protection) YES NO COMMENT:

26. Is MFA enforced on all users? YES NO COMMENT:

27. Do you strictly enforce SPF, DKIM and DMARC on incoming emails? YES NO COMMENT:



Representations and Signature

By signing this document, the undersigned authorized representative of the Applicant represents on behalf of all persons and entities proposed for coverage, after inquiry, that to the best of their knowledge:

1. The statements and answers given in and all materials submitted with this Application are true, accurate and complete.
2. No facts or information material to the risk proposed for insurance have been misstated or concealed.
3. These representations are a material inducement to the Insurer to provide a proposal for insurance.
4. Any policy the Insurer issues will be issued in reliance upon these representations.
5. The Applicant will report to the Insurer immediately in writing any material change in the Applicant's activities, products and services.
6. The Applicant will report to the Insurer immediately in writing any material changes to the answers provided in this Application which occur or are discovered between the date of this Application and the effective date of the policy for which coverage is sought by submission of this Application.
7. The Insurer reserves the right, upon receipt of any such notice, to modify or withdraw any proposal for insurance the Insurer has offered.
8. This Application must be signed by the Applicant's Chief Executive Officer, President, Chief Information Officer, Chief Technology Officer, Chief Security Officer, Chief Operating Officer, Chief Financial Officer or General Counsel or Risk Manager, or their functional equivalent, unless the Insurer instructs the Applicant otherwise.

Printing your name in the box below constitutes your signature, acceptance, and agreement as if actually signed by you in writing and has the same force and effect as a signature affixed by hand.

Print name:

Job title:

Date:

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