

## MEDIA ERRORS AND OMISSIONS APPLICATION FORM

### 1. GENERAL INFORMATION

1) Name of Organization or Legal Entity (Applicant):

\_\_\_\_\_ (please show complete name as you wish it to appear on the policy)

2) Address (Not P.O. Box):

\_\_\_\_\_  
 \_\_\_\_\_

If you require cover for any subsidiary companies you must name them below, and include the subsidiary information in all answers.

3) Name & Address of all subsidiaries:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

4) Website: \_\_\_\_\_

5) Date Firm was established: \_\_\_\_\_

### 2. REVENUE INFORMATION

6) Please split your annual income between the jurisdiction of your contracts:

JURISDICTION	ANNUAL INCOME
USA:	\$ _____
ELSEWHERE (please specify countries) _____	\$ _____
TOTAL:	\$ _____

### 3. PREVIOUS INSURANCE INFORMATION

7) If you currently have E&O insurance, please complete the following:

Limit of Liability: \_\_\_\_\_

Retroactive Date: \_\_\_\_\_

Deductible: \_\_\_\_\_

Premium: \_\_\_\_\_

### 4. COVERAGE REQUIRED

8) Limit of indemnity required:  \$250,000  \$500,000  \$1,000,000  Other: \$ \_\_\_\_\_

### 5. BUSINESS ACTIVITIES

9) Please provide the approximate split of your current annual income between the following:

**a) Creative Services**

Public Relations	%
Advertising	%
Graphic Design	%
Digital Marketing	%
Experiential Marketing	%
Branding	%
Production of Commercials and Music Videos	%
Production of Corporate Videos	%
Post Production	%
Market Research	%
Printing	%
Social Media Strategy	%
Direct Marketing	%
Sales Promotion	%
Photography/Videography	%
Media Buying	%
Animation	%
Marketing Consultancy	%

**b) Publishing/Broadcasting/Author:** %

**c) Other (please provide details below)** %

**TOTAL** **100 %**

10) Please describe your business activities, including any specialisms:

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11) If you do publishing or broadcasting or are an author, please provide approximate splits between the following (if you do not, please skip to question 13).

**a) How is content disseminated?**

TV	%
Radio	%
Web	%
Books	%
Magazines	%
Newspapers	%
Other (please specify) _____	%
<b>TOTAL:*</b>	<b>%</b>

**b) What is the nature of the content that you publish/broadcast?**

News	%
Celebrity	%
Special Interest	%
B2B	%
Fiction	%
Investigative/Expose	%
Other (please specify) _____	%
<b>TOTAL:*</b>	<b>%</b>

**\*TOTALS for 11) a) + 11 b) MUST EQUAL 100%**

c) If you do broadcasting, do you have a time delay to manage offending content?  YES  NO

12) a) Please give details of the **two (2)** largest contracts that you have carried out in the past **three (3)** years, or that are pending. **Please complete this section ONLY if you carry out creative services for clients as per Question 9 a).**

	<b>CONTRACT 1</b>	<b>CONTRACT 2</b>
NAME OF CLIENT:		
NATURE OF WORK, INCLUDING YOUR ROLE:		
DURATION:		
IS IT COMPLETE? PLEASE TICK RELEVANT BOXES:	<input type="checkbox"/> YES <input type="checkbox"/> NO If NO, is it overdue? <input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO If NO, is it overdue? <input type="checkbox"/> YES <input type="checkbox"/> NO
INCOME TO YOU:		
TOTAL VALUE OF CONTRACT:		

- b) What is your average income per contract? \_\_\_\_\_
- c) What is the highest profile client you have or expect to work for?  
 \_\_\_\_\_

**6. RISK MANAGEMENT PROCEDURES**

- 13) a) What procedures do you have in place to ensure that any photo, film clip, music or other content used by you does not breach any third party rights? If you have standard written procedures, please attach a copy.  
 \_\_\_\_\_
- b) Under what circumstances would you refer material to lawyers for checking and which lawyers do you use?  
 \_\_\_\_\_
- c) When creating content under contract, do you always obtain written client sign-off before it is printed, aired or published?  
 YES  NO
- d) If you are a publisher or author of content, please provide an overview of your editorial procedures and controls:  
 \_\_\_\_\_

**7. WEBSITE PROCEDURES**

- 14) a) Please provide details of your takedown procedures in the event of a complaint related to third party material:  
 \_\_\_\_\_
- b) Do you have any facility within your websites where any third party content may be published or otherwise made publicly accessible, e.g. any weblog, online journal, online diary, or online chat room?  
 YES  NO
- c) Do you subject all third party material to your standard checking procedures (as declared earlier in this application) prior to posting it on your Website?  
 YES  NO
- If you do not wish to include cyber coverage, please skip Question 15) below and go to Section 9. **CLAIMS DECLARATION.**

**8. PRIVACY**

- 15) a) Do you collect or store personally identifiable information (PII)?  YES  NO  
 If YES:
- b) Please describe type and amount by completing the boxes below:

TYPE	NUMBER OF PEOPLE		
	0-5,000	5,001-25,000	> 25,000
PAYMENT CARD:			
PASSPORT/NATIONAL INSURANCE/OTHER GOVERNMENT ISSUED ID:			
OTHER (please specify): _____			

c) Do you store this PII at all, even if briefly and if so, please describe how you store securely, including whether encrypted?  
 YES  NO

d) Do you allow PII to be stored on any mobile devices, such as laptops, tablets or USB sticks?  
If YES, do you have automatic encryption of such data?  YES  NO  
If NO, please state approximately how many devices are likely to have PII on them:  YES  NO

0-25                       26-50                       51-100                       > 100

**9. CLAIMS DECLARATION**

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16) After enquiry, are your management aware of any claim against you, or any matter which may lead to a claim against you, arising out of your business activities?  YES  NO

This includes:

- a complaint, direct or indirect criticism or dispute whether express or implied about your work, or anything you have supplied (whether justified or not), which you cannot reasonably rectify or remedy;
- a client withholding payment due to you following a complaint or an awareness of a failing or problem with your work, which you cannot reasonably rectify or remedy;

17) After enquiry, are your management aware of any loss from the actual or suspected dishonesty or malice of any employee or self-employed freelancer?  YES  NO

If YES to any of the above, please provide full details below:

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Without limitation of any other remedy available to the Insurer, it is hereby agreed that if there be knowledge of any of the matters described above, any written demand or civil proceedings for compensatory damages subsequently emanating therefrom is excluded from coverage under the proposed insurance.

**10. COMPLAINTS**

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If you have any concerns about your policy or you are dissatisfied with the handling of a claim and wish to complain you should, in the first instance, contact the Beazley complaints manager in writing to:

Beazley Group  
Plantation Place South  
60 Great Tower Street  
London EC3R 5AD  
T +44 (0)20 7667 0623  
beazley.complaints@beazley.com

11. WARRANTY STATEMENT

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The undersigned warrants that to the best of their knowledge, the statements set forth in this Application are true. The undersigned also warrants that they have not suppressed or misstated any material fact.

If the information provided in this Application should change between the date of the Application and the effective date of the policy, the undersigned warrants that they will immediately report such changes to the Insurer.

**Signing this Application does not bind the undersigned to purchase this insurance, nor does it bind the Insurer to issue this insurance. However, should the Insurer issue a policy, this Application shall serve as the basis of such policy and will be attached to and form part thereof.**

You agree that if the information supplied on this proposal changes between the date of this proposal and the effective date of the insurance, you will, in order for the information to be true, complete and not misleading on the effective date of the insurance, immediately notify us of such changes, and we may withdraw or modify any terms including agreements to bind the insurance.

I confirm that the statements are true, complete and not misleading.

\*\*This Application must be signed by the Board Member, Director, Officer or Senior Manager of the Company.

SIGNED: \_\_\_\_\_  
(Authorized Representative)\*

DATE: \_\_\_\_\_

(Please Print): \_\_\_\_\_

TITLE/POSITION: \_\_\_\_\_

## DATA PROTECTION SHORT FORM INFORMATION NOTICE

### Your personal information notice

#### ***Who we are***

We are the insurers identified in the contract of insurance and/or in the certificate of insurance.

#### ***The basics***

We collect and use relevant information about you to provide you with your insurance cover or the insurance cover that benefits you and to meet our legal obligations.

This information includes details such as your name, address and contact details and any other information that we collect about you in connection with the insurance cover from which you benefit. This information may include more sensitive details such as information about your health and any criminal convictions you may have.

In certain circumstances, we may need your consent to process certain categories of information about you (including sensitive details such as information about your health and any criminal convictions you may have). Where we need your consent, we will ask you for it separately. You do not have to give your consent and you may withdraw your consent at any time. However, if you do not give your consent, or you withdraw your consent, this may affect our ability to provide the insurance cover from which you benefit and may prevent us from providing cover for you or handling your claims.

The way insurance works means that your information may be shared with, and used by, a number of third parties in the insurance sector for example, insurers, agents or brokers, reinsurers, loss adjusters, sub-contractors, regulators, law enforcement agencies, fraud and crime prevention and detection agencies and compulsory insurance databases. We will only disclose your personal information in connection with the insurance cover that we provide and to the extent required or permitted by law.

#### ***Other people's details you provide to us***

Where you provide us or your agent or broker with details about other people, you must provide this notice to them.

#### ***Want more details?***

For more information about how we use your personal information please see our full privacy notice(s), which is/are available online on our website(s) or in other formats on request.

#### ***Contacting us and your rights***

You have rights in relation to the information we hold about you, including the right to access your information. If you wish to exercise your rights, discuss how we use your information or request a copy of our full privacy notice(s), please contact us on [DPO@beazley.com](mailto:DPO@beazley.com) or the agent or broker that arranged this insurance.

(LMA9151)  
25 April 2018