



Zurich Pro Plus[®]

Professional, Technology and Media Liability Insurance Policy - Declarations

Insurance is provided by the following **Underwriter**:

THIS POLICY PROVIDES CLAIMS MADE AND REPORTED COVERAGE, EXCEPT SUBSECTION I.D. **CLAIMS** MUST FIRST BE MADE AGAINST THE **INSUREDS** DURING THE **POLICY PERIOD**, OR ANY APPLICABLE EXTENDED REPORTING PERIOD, AND REPORTED TO THE **UNDERWRITER** PURSUANT TO SUBSECTION VII.F. OF THIS POLICY. THE PAYMENT OF **DEFENSE COSTS** REDUCES THE LIMITS OF LIABILITY.

Policy Number:

Renewal of:

Item 1. Named Insured:

Mailing Address:

Item 2. Policy Period:

From: 12:01 A.M. on To: 12:01 A.M. on
Local time at the address shown in Item 1.

Item 3. Aggregate Policy Limit of Liability \$

Aggregate each **Policy Period** for all Insuring Agreements, combined.

Note: The Limits of Liability and Self-Insured Retention ("SIR") are reduced or exhausted by **Defense Costs**.

Item 4. Coverage Schedule

Insuring Agreement	*Each Claim Limit of Liability	*Aggregate Limit of Liability	Self-Insured Retention (Each Claim)	Retroactive Date
A. Information Technology and Internet Liability (including Media Liability)				
B. Miscellaneous Professional Liability (including Media Liability)				
C. System Security and Privacy Liability				
Regulatory Proceeding Sublimit				
D. Privacy Breach Costs				

* If no amount is designated, the Insuring Agreement has not been purchased.

Item 5. Optional Extended Reporting Period Option

A. year(s) of the annual premium

Item 6. **Professional Services** (if Insuring Agreement B. is purchased):

Item 7. Notices to **Underwriter**

<p>A. Address for notice of Claims, Potential Claims or Privacy Events:</p> <p>Zurich North America -</p> <p>P. O. Box 968041 Schaumburg, IL 60196-8041 Fax: (866) 255-2962 Email: msgclms@Zurichna.com</p>	<p>B. Address for all other notice:</p> <p>Zurich North America -</p> <p>New York, NY 10006</p>
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Item 8. Endorsements Effective At Inception:

Item 9. Premium: \$

Specimen