U.S. Risk *Pros*

Cyber Insurance **Application** (Short Form)

U.S. Risk, LLC | 14241 Dallas Parkway, Suite 850, Dallas, Texas 75254

Applicant Name:Applicant Address:			
Subsidiaries: Website	e URL:er of Employees:		
FINANCIAL INFORMATION			
	Last Complete Financial Year	Current Year (Estimate)	Next Year (Estimate)
Gross Annual Revenue	\$	\$	\$
Annual Net Income Before Taxes	\$	\$	\$
Percentage of Gross Annual Revenue—Payment Card	%	%	%
Percentage of Gross Annual Revenue—Online	%	%	%
 Do you have firewall architecture in place? Yes Do all systems users have individual, mandatory and Are all PCs and servers protected with up-to-date ant What is the total number of Personal Identifiable Info What is the total number of Social Security Numbers What is the total number of Personal Health Informat How many payment card transactions do you proces What is the total number of Payment Card records sto 	non-trivial user IDs and passwo ti-virus that is updated regularly rmation records stored on your stored on your networks? ion records stored on your netws annually?	? Yes No	ord changes?
Authorized signature Typed or printed name:		Date Title:	