

glatfelterministrycare.com

Return completed application to submissions@glatfelters.com

Cyber Deductible desired:

HIPAA Violations Coverage Limit:

Injunctive and Declaratory Relief Limit:

None

\$1,000

\$25,000

\$25,000



APPLICATION

RELIGIOUS ORGANIZATION MANAGEMENT LIABILITY

GENERAL INFORMATION Date of Application: Date Proposal Needed By: **Current Carrier: Expiration Date:** Legal Name of Organization: Extended Named Insured(s): Mailing Address: Street or PO Box City County State Zip Code FEIN: Website: **Contact Information:** Primary: Phone Email Name Inspection: Name Phone Email Limit of Liability: \$1,000,000 Each Wrongful Act \$3,000,000 Annual Aggregate Indicate the coverage desired: Claims-made - Current Retroactive date: Occurrence **Employment Practices Liability** Cyber Liability and Privacy Crisis Management Expense

Please provide the following staff information:					
	House of Worship	School, if applicable (Pre-K–12)	Day Care	Camp / Retreat	
# Full-time employees:					
# Part-time employees:					
# Volunteers:					
# Temporary / Seasonal Workers:					
# Board Members:					
Total:					

\$2,500

\$50,000

\$50,000

\$5,000

\$100,000

\$100,000

\$10,000

\$15,000

\$25,000

\$50,000

Net Operating Budget	What are your total budgeted expenditures?	\$		
	How much are excluded operations?	\$		
	How much of the budgeted operations are insured elsewhere?	\$		
	How much is allocated to capital expenditures?	\$		
	What are the debt payments?	\$		
	What expenditures are considered inter-fund transfers?	\$		
	Total Net Operating Budget	\$		
Financial Information	Do all operations and entities operate under a tax-exempt, nonpr	ofit status?	Yes	No
	Are any funds allocated to you from an affiliated religious governing body or diocese on an annual basis?			140

Financial Information	Do all operations and entities operate under a tax-exempt, nonprofit status?	Yes	No
	Are any funds allocated to you from an affiliated religious governing body or diocese on an annual basis?)	
		Yes	No
	Is there a designated board, council, or vestry that oversees your operations, including budget allocation	s?	
		Yes	No
	Do you have a documented Policies and Procedures Manual for your designated board members?	Yes	No

Employment Practices	Do you have an Employee Handl	oook?			Yes	No
	Do you have a handbook which specifically addressed volunteers and volunteer activities?			Yes	No	
	Is your handbook periodically reviewed by your legal counsel?				Yes	No
	By your governing body	's Legal counsel?			Yes	No
	How many employees have been terminated BY YOU during the last three years?					
	What is the estimated annual employee turnover rate?					
	If you operate a school, what is the	ne school's employe	e turnover rate?		N/A	
	Are any of the school employees	unionized?			Yes	No
	Do you have documented policies	s and procedures ac	ddressing the following are	as?		
	Discipline	Discrimination	Hiring	New Employee / Volur	teer Orien	tation
	Performance Evaluations	Promotions	Sexual Harassment	Termination		
	Do you have any knowledge of a	ny incident, acciden	t, or occurrence which may	y result in a claim?	Yes	No
	Have any of the above incidents	been reported to a c	current or previous carrier?	Yes	No	N/A

CYBER LIABILITY protects you when claims are made against you for monetary damages arising out of an electronic information security event. \$1,000,000 Each Electronic Information Security Event, subject to \$3,000,000 Annual Aggregate

Do all operations and entities operate under a tax-exempt, nonprofit status? Yes No

PRIVACY CRISIS MANAGEMENT EXPENSE reimburses for expenses you incur as a result of a privacy crisis management event first discovered during the policy period. This first party coverage is intended to provide professional expertise in the identification and mitigation of a privacy breach while satisfying Federal and State statutory requirements.

\$ 50,000 Each Privacy Event / \$ 50,000 Aggregate \$100,000 Each Privacy Event / \$100,000 Aggregate \$250,000 Each Privacy Event / \$250,000 Aggregate \$500,000 Each Privacy Event / \$500,000 Aggregate

Please respond to the following questions:		
 Is firewall technology used at all internet points of presence to prevent unauthorized access to internal networks? 	Yes	No
Do you use antivirus software on all desktops, portable computers and mission critical servers?	Yes	No
3. Are antivirus applications updated in accordance with the software provider's requirements?	Yes	No
4. Are your employee, customer and other physical and electronic records maintained in a secure environment with limited access?	Yes	No
5. Has your organization suffered a computer attack, such as a hacking attack, breach of personal information, denial of service attack	k, virus c	r
malware infection or ransomware attack, in the last 12 months?	Yes	No
6. Do you have a written information security and privacy policy?	Yes	No
7. Do you backup your computer and data and store it off site?	Yes	No
8. Do you use encryption techniques for secure communications and the transfer of confidential information?	Yes	No

FRAUD WARNING NOTICE - 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 act, which is a crime, and may subject such person to criminal and civil penalties.

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Alabama	Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or who knowingly presents false information in an application for insurance is guilty of a crime and may be subject to restitution, fines, or confinement in prison, or any combination thereof.
Arkansas	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.
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 Authorities.
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.
Kansas	Any person who knowingly and with intent to defraud, presents, causes to be presented or prepares with knowledge or belief that it will be presented to or by an insurer, purported insurer, broker or any agent thereof, any written, electronic, electronic impulse, facsimile, magnetic, oral, or telephonic communication or statement as part of, or in support of, an application for the issuance of, or the rating of an insurance policy for personal or commercial insurance, or a claim for payment or other benefit pursuant to an insurance policy for commercial or personal insurance that such person knows to contain materially false information concerning any fact material thereto; or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act.
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 an 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.
Minnesota	A person who files a claim with intent to defraud or helps commit a fraud against an insurer is guilty of a crime.
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 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 or statement of claim containing any materially false information or conceals, for the purpose of misleading, information concerning any fact material thereto, may be guilty of a fraudulent act, which may be a crime, and may subject such person to criminal and civil penalties.
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.
Rhode Island	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.
Tennessee	It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.
Vermont	Any person who knowingly presents a false statement in an application for insurance may be guilty of a criminal offense and subject to penalties under state law.
Virginia	It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines, and denial of insurance benefits.
Washington	It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines, and denial of insurance benefits.
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.

Your signature below acknowledges that you have read the Fraud Warning Notice that applies to your state of domicile.

The undersigned is an authorized representative of the applicant and certifies the information provided to obtain this coverage is accurate to the best of their knowledge; this includes any applications, locations schedules, valuation statements, loss history information and engineering reports.

Applicant's signature:	Title:	Date:
Agent's signature:		Date: