



[CYBERSURE Coverage Supplement]  
**CANADIAN ANTI-SPAM LEGISLATION (CASL)  
COVERAGE SUPPLEMENT**

# CANADIAN ANTI-SPAM LEGISLATION (CASL) COVERAGE SUPPLEMENT

Coverage must be purchased along with Can-Sure Cyber and Data Breach Coverage

## PART 1 GENERAL INFORMATION

Broker: \_\_\_\_\_ Contact Person: \_\_\_\_\_ Tel: \_\_\_\_\_

Name of Insured (Full Legal Name): \_\_\_\_\_

Operating Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Location Address (if different than above): \_\_\_\_\_ Postal Code: \_\_\_\_\_

LIMIT REQUESTED:  \$50,000  \$100,000  \$250,000  Other Amount: \$ \_\_\_\_\_

1. Do you use email, SMS, social media or instant messaging or text messaging to send commercial or promotional information about your organization to customers, prospects and other important audiences?  Yes  No

If "Yes" to above, please explain in detail:

2. When communicating electronically, do your messages include:

Identifying information about your Company?  Yes  No

A clear way for recipients to contact you?  Yes  No

An "Opt-Out" option?  Yes  No

3. How do you request and record consents received to send messages to recipients?

4. How do you record "Opt-Out" or "Unsubscribe" requests?

5. How do you add contacts to your mail-out lists? (Purchase lists, memberships directories, business cards, etc.):

6. Do you hire third party providers to issue electronic messages on your behalf?  Yes  No

7. Do you perform electronic messaging on behalf for third parties?  Yes  No

8. How do you prevent outside parties from accessing your mail servers?

9. Do you install software programs on people's computers or mobile devices?  Yes  No

If "Yes" to above question, please describe how you **seek express consent to install software or computer programs in compliance with CASL:**

## NOTICE TO APPLICANT:

Consumer and previous insurer reports containing personal, credit, factual or investigative information about the applicant may be sought in connection with this Applicant for Insurance or any renewal, extension or variation thereof. All provisions contained in the various forms issued under this contract shall be deemed to be contained in the present Application of Insurance. The policy may be deemed to be void and claims may be denied where:

- 1) An applicant for a contract:
  - a) Gives false or erroneous information to the prejudice of the insurer, or
  - b) Knowingly misrepresents or fails to disclose in the Application any fact required to be stated therein; or
- 2) The Insured contravenes a term of the Contract or commits a fraud; or
- 3) The Insured willfully makes a false statement in respect of a claim under the contract.

I CERTIFY THAT ALL STATEMENTS MADE IN THIS APPLICATION ARE COMPLETE AND ACCURATE, I AM AUTHORIZED TO CONTRACT ON BEHALF OF THE INSURED, AND I APPLY FOR A CONTRACT OF INSURANCE BASED UPON THE TRUTH OF THESE STATEMENTS.

I AM IN AGREEMENT THAT THIS DECLARATION SHALL HEREBY FORM PART OF THE INSURANCE CONTRACT.

Applicant's Signature: \_\_\_\_\_

Position: \_\_\_\_\_

Please print name: \_\_\_\_\_

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