

ERRORS AND OMISSIONS LIABILITY Application

| □ w | ESTERN WORLD INSURANCE COMPANY | ANCE COMPANY | | | | |
|------------|--|--|--|--|--|--|
| app | FICE: This Application is for a CLAIMS-MADE AND REPORTED COVERAGE FORM. The Cover lying for is limited to liability for only those "claims" that are first made against you and reporte cy period. | age Form you are d to us during the | | | | |
| 1,0 | Name of Firm: Cameron County District Clerk | | | | | |
| | Address: 974 E. Harrison st. | | | | | |
| | City: Brownsville State: Texas Zip | o: 78520 | | | | |
| 2. | Website: http://www.co.cameron.tx.us/judicial_courts/district_clerk/Index2. Date Establishe | d: 1848 | | | | |
| 3, | How long have you been engaged in current occupation or business? 5 Years | | | | | |
| 4. | Is the firm owned by, associated with or controlled by any other business, or are you engaged in any other profession or business? If Yes, give details: | ☐ Yes Ø No | | | | |
| 5. | Are you seeking insurance coverage for any other business? | ☐ Yes 🗹 No | | | | |
| 6. | Describe in detail the nature of the professional or business activities for which insurance is desired District Clerk's Manual Attached | d. | | | | |
| | | | | | | |
| _ | | | | | | |
| 7. | 3,300,000.00 | | | | | |
| _ | Prior Year: 2018 \$ 3,500,000.00 Next Year: 2020 \$ 3,500,000.00 | | | | | |
| 8. | Do you use independent contractors? If Yes, how many and what percent of your total receipts are subcontracted? # of subcontractors: % of total receipts | ☑ Yes ☐ No | | | | |
| | Does the Applicant require its subcontractors to maintain professional liability insurance? | ☐ Yes ☐ No | | | | |
| | Do contracts with subcontractors have hold harmless or indemnity agreements that benefit the Applicant? | | | | | |
| | ** | ☐ Yes ☐ No | | | | |
| | Explain what types of services are subcontracted: see list on second page. | | | | | |
| | | | | | | |
| 9. | What percentage of the Applicant's services are provided under written agreement? % | 1-20 | | | | |
| 10. | Are Applicant's contracts reviewed by an outside law firm that you hire? | ☐ Yes 🗹 No | | | | |
| 11, | Does the Applicant maintain and adhere to formalized corporate governance procedures which control the Applicant's business activities to ensure compliance with all federal, state and local statutes which pertain to the conduct of the Applicant's business? | ☑ Yes ☐ No | | | | |
| 12, | Does the Applicant have a process in place to handle and resolve client complaints? | ☑ Yes ☐ No | | | | |
| 13. | Does the Applicant require continuing education for all professional employees? | Yes V No | | | | |
| 14. 15. | Does the Applicant provide formalized in-house training for all professional employees? Does the Applicant have any risk management procedures established and in use? | ☑ Yes ☐ No | | | | |
| 10. | poes the Applicant have any high management procedures established and in use? | ✓ Yes ☐ No | | | | |

| 16. | Provide details of General Liability | insurance in force. | | | _ |
|--|---|----------------------|------------------------|-------------------------|---------------|
| | Company | | Limit | Deductible | Policy Term |
| | TAC | | 1,000,000.00 | 1,000.00 | 1 year |
| 7. | Please provide details of Errors and Omissions insurance carried during the last three (3) years. | | | | S. |
| | Company | Limit | Deductible | Premium | Policy Term |
| | Western World Insurance Co. | \$1,000,000.00 | \$1,000.00 | | 2018-2019 |
| | Western World Insurance Co. | \$1,000,000.00 | \$1,000.00 | | 2017-2018 |
| | Western World Insurance Co. | \$1,000,000.00 | \$1,000.00 | | 2016-2017 |
| | Is your expiring Policy/Coverage F If Yes, give Retroactive Date. | orm a CLAIMS-MA | DE AND REPORTE | D COVERAGE FOR | M? Yes No |
| YB | ER-LIABILITY SUPPLEMENTAL | QUESTIONS | | | |
| If Cyber-Liability coverage is desired, check Limit of Insurance ☐ \$25,000 ☐ \$50,000 ☐ \$100,000 ☐ \$250,000 and respond to Questions 18 - 27. | | | | | |
| 8. | Total Number of Clients: | | | | |
| 9. | Do you have written policies in pla compliance? | ce which address re | ecords and information | on management | Yes No |
| 0. | Do you have written policies in place which address network security? ☐ Yes ☐ No | | | | ☐ Yes ☐ No |
| 1. | Has a network security assessmen | nt or audit been con | ducted within the pa | st 12 months? | ☐ Yes ☐ No |
| 2. | | | | | |
| | internal networks? | , | · | | ☐ Yes ☐ No |
| 3. | Does your company use antivirus | software on all desk | tops, portable comp | uters and mission | |
| | critical servers? | | | | ☐ Yes ☐ No |
| 4. | Do you have a written disaster rec | overy and business | continuity plan for y | our network? | ☐ Yes ☐ No |
| 25. | Does the Applicant follow establish of client or employee data and/or s | | | firming the destruction | on ☐ Yes ☐ No |

CLAIMS QUESTIONS

28. Has any Application for Errors and Omissions or similar insurance been made on your behalf, your firm or present partners, owners, officers or employees, or has any insurance ever been cancelled or refused renewal?

If Yes, give details below or attach an information sheet.

27. During the last three years, has anyone alleged that their personal information was

compromised, or have you notified customers that their information was or may have been

26. Do you have a written data breach response plan?

compromised, as a result of your activities?

| 29. | Have any claims, suits or proceedings been made during the past five (5) years against you, your firm, your predecessors in business or against any present partners, owners, officers or employees? If Yes, give details below or attach an information sheet. | ☐ Yes ☑ No |
|-----|--|-------------|
| | | |

☐ Yes ☐ No

☐ Yes ☐ No

| 30. | Are you aware of any alleged act, circumstance, situation or error or omission which may result in a "claim" being made against you or any of the persons or firm described on this application? | ☐ Yes 🗹 No | | | |
|--|---|-------------------------------|--|--|--|
| | If Yes, give details below or attach an information sheet. | | | | |
| | | | | | |
| 31. | During the past five years, has the Applicant, or any of its predecessors in business, subsidiaries or affiliates, or any of the principals, directors, officers, partners, professional employees or independent contractors ever been the subject of a disciplinary action as a result of professional activities? | ☐ Yes ☑ No | | | |
| | If Yes, give details below or attach an information sheet. | | | | |
| | | | | | |
| CON | UD WARNING: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD AN MPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMS ITAINING ANY MATERIALLY FALSE INFORMATION OR CONCEALS, FOR THE PURPOSE OF DRIVING ANY FACT MATERIAL THERETO IS GUILTY OF INSURANCE FRAME AND SUBJECTS SUCH PERSON TO CRIMINAL AND CIVIL PENALTIES. | ENT OF CLAIM F MISLEADING. | | | |
| | R NEW YORK INSUREDS: AN ACT OF INSURANCE FRAUD SHALL BE SUBJECT TO A CIVIL EXCEED \$5,000 AND THE STATED VALUE OF THE CLAIM FOR EACH SUCH VIOLATION.) | PENALTY NOT | | | |
| YOU HEREBY DECLARE that the above statements and particulars are true and that you have not suppressed or misstated any material facts and you agree that this Application will be the sole basis of any subsequent contract or insurance with us. Signature on the Application does not bind you or us to complete the insurance. | | | | | |
| Appl | ication must be signed and dated by principal, partner, officar or director of the firm. | | | | |
| 02/2 | 2/2019 Cameron Co | unty District Clerk | | | |
| | Date Sintiture of Applicant | Title | | | |
| PRE INST | ASE NOTE: COMPLETION AND SUBMISSION OF THIS APPLICATION IS FOR THE PURPOSE OF MIUM QUOTATION ONLY. NO COVERAGE WILL BE EFFECTED UNTIL RECEIPT FRUCTIONS AND PREMIUM PAYMENT. ANY SUBSEQUENT CONTRACT ISSUED WILL BE IN 10 NOTHE STATEMENTS AND REPRESENTATIONS MADE IN THIS APPLICATION AND THIS APP | OF WRITTEN FULL RELIANCE | | | |

BE MADE A PART OF THE COVERAGE FORM. A SIGNED APPLICATION DATED NOT MORE THAN 45 DAYS PRIOR TO THE INCEPTION DATE WILL BE REQUIRED IN THE EVENT COVERAGE IS EFFECTED.

Question 6 Subcontracted Services

- 1. Tyler Technologies Case Management System data is entered daily for court activity
- 2. Kofile Preservation, imaging and indexing of historical records
- 3. iDocket maintains an online docket of court cases
- 4. Xerox copy machines used for scanning and making copies
- 5. Judicial Systems Automated Jury System
- 6. Hammer credit card payments
- 7. iPlow to manage and collect court costs for criminal and Title IV-D cases
- 8. Accurint Address verification to locate delinquent defendants
- 9. Pitney Bowes Folding machine for stuffing and sealing envelopes
- 10. Dahill provides printers, maintenance and printer supplies
- 11. DPS imaging and indexing court documents
- 12. Efiletexas.gov mandated by the Supreme Court of Texas for attorneys to electronically file court documents online
- 13. Re:SearchTX provides copies of documents filed through efiletexas.gov
- 14. Time Warner phone and cable
- 15. Rochester Armored Car Picks up daily deposits and transports them to the bank