

Insurance Application Form

Intellectual Property Insurance

infringement due to your products.

IMPORTANT:

All questions must be answered completely. If any are not applicable, please indicate. Please also provide any relevant documentation and/or images alongside this form.

Please note that ATA may request further information depending on the answers provided to the questions below.

Explanations and definitions on this form are not policy covering, please see corresponding IP wording
1. Proposer Details
1.1 Company name:
1.2 Registered Address:
1.3 Year business commenced:
1.4 List subsidiary companies
2. Policy Details
2.1 Period of insurance:
2.2 Policy currency:
Diagon indicate which Sections of Cover and Inquired Leas you required
Please indicate which Sections of Cover and Insured Loss you require: 2.3 Section A - Infringement Defence
2.3 Section A - Infiningement Defence
In general, this section covers your legal costs if you're accused of infringing someone else's IP rights through your business activities.
2.4 Section B - Indemnified Party Defence
In general, this section covers your obligation to defend third parties (like customers) if they're accused of IP

	2.5 Section C - Intellectual Property Rights Enforcement						
In general, this section covers the costs of pursuing third parties who infringe your IP rights.							
2.6 Section D- Intellectual Property Rights Protection							
In general, this section covers the costs of defending challenges to your ownership or rights to IP.							
2.7 Section E - Contractual I	Disputes						
In general, this section cove	rs the legal costs arising	from breaches of IP-re	lated agreements.				
2.8 Please indicate the limit	of indemnity required in	n aggregate:					
500,000	1,000,000	5,000,000	10,000,000	Other:			
2.9 Please indicate your rec	juired level of Excess per	r Claim:					
5,000	10,000	50,000	100,000	Other:			
3. Financial Information							
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3.1 Has the insured been inv	volved in any merger, acc	quisition or joint ventur	e in the past three	e years?			
			·	e years?			
3.1 Has the insured been inv		e following years in the	·	e years? Estimate for Next FY			
3.1 Has the insured been inv	revenue in respect of the	e following years in the	table below:				
3.1 Has the insured been inv 3.2 Please state your gross i	revenue in respect of the	e following years in the	table below:				
3.1 Has the insured been inv3.2 Please state your gross in North America	revenue in respect of the	e following years in the	table below:				
3.1 Has the insured been inv 3.2 Please state your gross in North America Europe	revenue in respect of the	e following years in the	table below:				
3.1 Has the insured been inv 3.2 Please state your gross in North America Europe Rest of the World	revenue in respect of the	e following years in the Estimate fo	table below:				
3.1 Has the insured been involved. 3.2 Please state your gross of the World. Total	revenue in respect of the Last Complete FY	e following years in the Estimate fo	table below: or Current FY of products (%):	Estimate for Next FY			

4.1 Please describe your products/services and how they differ from competitors: 4.2 Please provide details of your top 5 income generating products: Product/Product Line Description of Product/Product Line Product Line 4.3 Do you plan to launch new products or enter new markets in the next 12 months?

Revenue of Product/

Product Line

4.4 Are any of the above products sold under a third party's brand ("White Labelled")?

4.5 Please provide details of your top 5 competitors:

Product/Product Line

Description of Product/Product Line

5. Intellectual Property

5.1 Please provide details of all intellectual property that you hold by completing the tables below:

Patents Identifying title name or brand name	Territory	Application/ Grant No	Application/Grant Date (DD/MM/YY)	Status
Registered Designs Identifying title name or brand name	Territory	Application/ Grant No	Application/Grant Date (DD/MM/YY)	Status
Registered Trade or Service Identifying title name or brand name	Marks Territory	Application/ Grant No	Application/Grant Date (DD/MM/YY)	Status

5.2 Do you hold any other intellectual property, such as copyrights, trade secrets or domain names?

6. Contracts and Risk Management

Please complete this section if you have any contracts that govern intellectual property:

6.1 Please complete the following in respect of your three largest contracts:

Name of Client	Annual contract income	Duration	indemnify or hold the client harmless in infringement proceedings?	
			YES	NO
			YES	NO
			YES	NO

Does this contract require you to

7. Intellectual Property Rights Risk Management

7.1 F	Please	describe	below v	our/	procedure for:	
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- preventing infringement of third party intellectual property rights
- obtaining licenses to use and the monitoring of third party intellectual property rights

7.2 Please describe your procedures for managing intellectual property right issues, including responding to an allegation of infringement and how the individual responsible for intellectual property rights issues is qualified for the role:

8.3 Do you perform work at third-party premises (e.g. customer sites)? If yes, describe the nature of this work:

7.3 Have you ever receintellectual property?	vived any claims, threats, or legal actions related to alleged infringement, misuse, or ownership of
YES	NO

7.4 Have you ever taken action against a third party regarding infringement, misuse, or ownership of your intellectual property?

YES NO

If 'Yes' to either question above, please provide details including: the opposing party, key dates, legal costs, any settlement or damages paid, and the IP involved.

8. Claims and Incident History

8.1 Please state whether you are aware of any incident which:

a) may result in a claim under any of the insurance for which you are applying:

YES NO

b) resulted in legal action being made against any of the insured companies within the last 5 years: YES

YES NO

If you answered 'Yes,' please describe the incident, including amounts involved, key dates, and the current status of any unresolved claims.

9. Additional Information

9.1 Please use this space for anything else you would like to tell us about your insurance application.

10. Declaration

I certify that the information given above is, to the best of my knowledge, accurate and complete. I understand that ATA is
relying on such information in the issue of an insurance policy. I have obtained the express consent to the disclosure and
use of sensitive personal data from every data subject whose sensitive personal data is supplied in connection with this
form for the purposes of (a) underwriting the risks and (b) performing any resulting insurance contract.

Name		
Position		
Date		

About ATA

Advanced Technology Assurance Limited (ATA) is a global insurance powerhouse for advanced technologies. ATA's team of highly technical underwriters handle advanced technology risks in a remarkably straightforward way. Backed by rock-solid financial strength, ATA offers fit-for-purpose insurance products that protect and enable the growth of industries that shape the future.

ATA's edge is developing specialty insurance products for advanced technologies in high-growth segments of sectors forming the backbone of the global economy: aerospace, defence, energy, industrial, transportation, and technology. ATA is committed to supporting industrial transformation, electrification, automation, and computing at scale—enabling a smarter, more sustainable world.

Headquartered in London and serving customers through their insurance brokers in major markets across the world, ATA commenced insurance operations in October 2023 with the cornerstone financial investment and underwriting capacity of Convex Group Limited.

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