

최신RIBO-Level-1시험대비덤프최신샘플시험대비공부자료

EMC DEP-3CRI PowerProtect Cyber Recovery Exam 3

질문 # 26
 An enterprise customer needs a Cyber Recovery solution to be implemented. As an outcome from a previous workshop, the following backup environment needs to be protected to the CR Vault.
 Location 1: 4 PowerProtect DDs
 Location 2: 4 PowerProtect DDs
 Location 3: 2 PowerProtect DDs
 Location 4: 2 PowerProtect DDs
 The customer wants to implement a CR Vault in a 5th location.
 How many Cyber Recovery systems must be installed at a minimum level?

- A. 0
- B. 1
- C. 2
- D. 3

정답: B

질문 # 27
 What vault status is displayed if none of the PowerProtect DD systems in the CR Vault are able to communicate with the Cyber Recovery software?

- A. Unknown
- B. Unlocked
- C. Locked
- D. Degraded

정답: B

질문 # 28

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https://www.koreadumps.com/DEP-3CRI_exam-braindumps.html

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최신 RIBO Insurance Broker RIBO-Level-1 무료샘플문제 (Q161-Q166):

질문 # 161

Joe and Cindy purchase coverage for their very first car with an effective date of June 20th, 2023 at 12:01 AM. They sign the documents on June 10, 2023. Cindy and Joe pick up the car early on June 15, 2023. They get into an accident with another car on their way home. Is the damage to the vehicle covered and why?

- A. No, because the accident occurred before the effective date of the policy.
- B. Yes, because they already signed the papers.
- C. Yes, because the dealership's insurance will cover the vehicle until Joe and Cindy's policy is in effect.
- D. No, because auto insurance policies only cover damages after payment of the first premium.

정답: A

설명:

The correct answer is B because insurance coverage begins on the effective date and time shown on the policy, not on the date the application or documents are signed. In this question, the policy was set to take effect on June 20, 2023 at 12:01 AM, but the accident happened on June 15, 2023, which is before coverage started.

Since the loss occurred outside the policy period, the damage to the vehicle would not be covered under Joe and Cindy's policy.

A is incorrect because signing documents does not by itself create earlier coverage if the effective date is stated for a later time. C is also incorrect because the dealership's insurance does not automatically continue to protect the buyer once they have taken possession of the vehicle for their own use. That assumption would be unsafe and contrary to proper broker advice. D is not the best answer because while premium payment is important, the key issue here is the policy effective date, not whether the first premium had been paid.

From a RIBO perspective, this question tests understanding of when coverage attaches. A broker must clearly explain to clients that they must not take possession or drive a vehicle until insurance is actually in force.

질문 # 162

Stanley recently moved back to Ontario after living abroad for two years. He purchased a vehicle and is asking his Broker for insurance quotes. One insurance company's quote is favourable but the company prefers not to insure Stanley because of the gap in his insurance history. What should the Broker do to act within the scope of his agreement with the insurance company?

- A. Discuss the risk with colleagues first and then submit the completed application to the insurer.
- B. Discuss the risk with the insurer's underwriter for binding approval and then submit the completed application to the insurer.
- C. Obtain approval for the risk from the Principal Broker for approval and then submit the completed application to the insurer.
- D. Submit the application without the driving gap as this will get Stanley the best rate.

정답: B

설명:

This question tests a broker's understanding of Binding Authority and the Agency Agreement between the brokerage and the insurer. In Ontario, while the "Take-All-Comers" (TAC) rule generally requires insurers to provide a quote to all eligible risks, a broker's individual authority to "bind" (instantly start) a policy is governed by specific underwriting guidelines. A gap in insurance history is often a criterion that falls outside of a broker's standard "automatic" binding authority.

To remain in Legal and Regulatory Compliance, a broker must never exceed the authority granted by the insurer. If an applicant does not meet the standard criteria (like a two-year gap), the broker must refer the file to a company underwriter. Discussing the risk with the underwriter allows the broker to explain the context of the gap (e.g., living abroad) and obtain specific binding approval. This ensures the policy is valid from the moment of inception. Choosing option D would constitute fraudulent misrepresentation, a severe breach of the RIB Act and the RIBO Code of Conduct (Ontario Regulation 991), which could lead to the revocation of the broker's license. The RIBO Competency Profile emphasizes that a Level 1 broker must recognize the limits of their professional capacity and use appropriate communication channels with insurers to ensure that every risk is accurately disclosed and properly authorized, thereby protecting the brokerage from liability and the client from having a voided policy.

질문 # 163

What does a medical questionnaire for Travel insurance determine?

- A. The medical condition of the client to confirm if they can travel.
- B. Mode of travel and length of stay for client.
- C. The client's eligibility and rate category.
- D. The amount of coverage and deductible the company can offer the client.

정답: C

설명:

In the realm of Travel Health Insurance, the medical questionnaire serves as the primary underwriting tool for assessing the risk associated with a traveler's health status. According to the RIBO Competency Profile, a broker must possess the technical knowledge to explain how insurers use these documents to classify risk.

The questionnaire's primary function is to determine eligibility-whether the applicant meets the insurer's basic criteria for coverage-and the rate category, which dictates the premium level based on the applicant's health history and pre-existing conditions.

Travel insurance differs from standard health insurance because it often focuses on "stability periods" for pre-existing medical conditions. The questionnaire asks detailed questions regarding medications, recent hospitalizations, and chronic illnesses to place the applicant in a specific "tier" or "rating." If a client fails to provide accurate information, it constitutes misrepresentation, which is a violation of the Insurance Act and can lead to the denial of a claim or the policy being voided ab initio. While the questionnaire might provide an indication of health, its legal and commercial purpose is not to provide medical advice on whether a person is "fit to travel" (which is a doctor's role), but to determine the financial terms of the insurance contract. As part of the Consulting and Advising competency, brokers must stress the importance of the principle of uberrimae fidei (utmost good faith) to the client, ensuring they understand that their answers directly impact the validity of the coverage and the cost of the policy.

질문 # 164

Which statement regarding the Uninsured Automobile Coverage in your insured's O.A.P. 1 Owner's Policy policy is CORRECT?

- A. It provides coverage for liability to others in case your insured forgets to renew their policy.
- **B. It includes a certain amount of coverage for accidental damage to the insured's automobile provided the owner or driver of the uninsured automobile is identified.**
- C. It includes a certain amount of coverage for accidental damage to the insured's automobile caused by a hit and run automobile, where neither the owner nor driver of the other automobile is identified.
- D. It only covers bodily injury but never accidental damage to the insured's own automobile.

정답: B

설명:

Section 5 - Uninsured Automobile Coverage is a mandatory component of the OAP 1 designed to protect the insured when they are involved in an accident with a motorist who has no insurance or is unidentified (Hit and Run). However, the application of this coverage differs significantly between Bodily Injury and Property Damage.

Under the Legal and Regulatory Compliance framework of Ontario, for the Property Damage (PD) portion of Uninsured Automobile Coverage to pay out, the "uninsured" driver or owner must be identified. This is a strict anti-fraud measure. If a driver claims a "hit and run" caused a dent in their car, but cannot identify the other party, the claim cannot be made under Section 5 (Uninsured Auto); it must instead be made under the insured's own Collision coverage (subject to their deductible). If they do not have Collision coverage, they have no recovery for the vehicle damage.

Conversely, Bodily Injury claims can be made even if the other driver is not identified (Hit and Run), provided there is evidence of the accident. The RIBO Level 1 Blueprint emphasizes that brokers must be able to explain these nuances during Consulting and Advising. A client who only carries "Liability and Accident Benefits" (One-way insurance) needs to know that a hit-and-run to their car will not be covered unless they can identify the perpetrator. This technical distinction is vital for maintaining the Broker-Client Relationship and ensuring the client understands exactly what they are-and are not-paying for in their mandatory coverage.

질문 # 165

What is the meaning of implied consent?

- A. The ability for one party to infer to another party how to proceed.
- B. The act where a third party gives declarative permission for a specific action to be taken by the first party to which they both agreed.
- C. The act where a person gives declarative permission for a specific action to be taken by the other party to which they both agreed.
- **D. The assumption that a person has given permission for an action which is inferred from their actions rather than expressly provided.**

정답: D

설명:

The correct answer is C because implied consent means permission is inferred from a person's conduct, behaviour, or the

surrounding circumstances , rather than being stated clearly in words or writing. In privacy and regulatory compliance concepts relevant to brokers, this is different from express consent , where the individual explicitly agrees.

The uploaded PIPEDA material explains that organizations must consider the appropriate form of consent, either express or implied , and states that while consent should generally be express, it can be implied in strictly defined circumstances . It also says the choice between implied and express consent depends on factors such as the sensitivity of the information and the reasonable expectations of the individual . Where information is sensitive, outside reasonable expectations, or creates a meaningful risk of harm, express consent is generally required .

That is why A and D describe forms of explicit or declared permission, not implied consent. B is too vague and does not describe consent itself. From a RIBO perspective, brokers must understand that relying on implied consent has limits. For important changes, sensitive information, or uses outside the client's reasonable expectations, proper express client consent should be obtained and documented.

질문 # 166

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