This form will need to be filled out and sent to the appropriate contact based on the location of your event. This form should be submitted as soon as possible but no later than 30 calendar days prior to any catered event (with a set number of attendees and predetermined group), when not using a caterer from the University's Approved Catering List. The form is not required for “drop off” food when less than 50 people attend and all are University staff. However, all University requirements for food vendors as listed on page 2 must still be met. Once the form is received, decisions will be made as to the requirements necessary to serve food at your event, including what type of health permit and any insurance information that will be necessary. Submitting this application is only the first step. All decisions will be provided in writing. Please realize waivers will not be granted unless it is clear that none of the approved caterers are able to meet your group's needs. Submitting this form early in the process can help your organization have a successful event by utilizing University resources that can assist you. If you have any questions regarding the process or filling out this form please contact the appropriate office listed at the end of this form. The Environmental Health & Safety Department does charge a $30 processing fee to be paid by cash, check or 312 requisition.

<table>
<thead>
<tr>
<th>Name of Event</th>
<th>Date of Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>Event location</td>
<td>Food serving: start time __________</td>
</tr>
<tr>
<td>Organization/Dept.</td>
<td>Number of expected attendees</td>
</tr>
<tr>
<td>Person(s) in charge &amp; phone#(s)</td>
<td></td>
</tr>
<tr>
<td>Name &amp; phone # of person completing form</td>
<td></td>
</tr>
<tr>
<td>Type of event:</td>
<td>private group</td>
</tr>
<tr>
<td>Will grills be used?</td>
<td>If yes, what type</td>
</tr>
<tr>
<td>Will a tent(s) be used?</td>
<td>If yes, will it be enclosed</td>
</tr>
<tr>
<td>Will alcohol be served?</td>
<td>If yes, who will be serving</td>
</tr>
<tr>
<td>List food &amp; beverage items to be served:</td>
<td></td>
</tr>
<tr>
<td>Food purchase location</td>
<td></td>
</tr>
<tr>
<td>Who will be preparing the food?</td>
<td></td>
</tr>
<tr>
<td>Who is the certified food handler overseeing the food preparation for this event?</td>
<td></td>
</tr>
<tr>
<td>List address and phone # if restaurant or caterer will be preparing the food:</td>
<td></td>
</tr>
<tr>
<td>Who will be serving the food?</td>
<td></td>
</tr>
<tr>
<td>Explain need for waiver</td>
<td></td>
</tr>
</tbody>
</table>
UNIVERSITY OF ROCHESTER
Catering Waiver Application Form

Answer the following questions if your group will be serving the food.

How is the food to be transported?

What cold holding equipment will be used during the event?

What hot holding equipment will be used during the event?

Are there gloves and hats for workers? __________

Are there gloves and hats for workers? __________

What equipment will be used for hand washing? __________

Have you received a copy of the Sanitation Guidelines? ( ) Yes    ( ) No

Have you gone over or plan to go over the Guidelines with all individuals involved with the preparation or serving process? ( ) Yes    ( ) No

====================================================================================================

Insurance Information: Please provide with Waiver Application copies of the following:
- Certificate of Insurance, naming the University of Rochester as an additional insured,
  evidencing the following insurance:
  - General Liability Insurance w with $1 M per occurrence/$2M aggregate
  - Auto Insurance with $1M in coverage
  - Worker Compensation Insurance as required by NYS
  - Disability Insurance as required by NYS
  - Liquor Legal Liability with $1M in coverage (if alcohol is part of services provided) for 1 calendar year
- Copy of Monroe County Issued Catering Permit
- Copy of Current Food Safety Certification for at least 1 food handler
- Copy of your NYS Liquor License - or if subcontracted, your provider's License and
  - Liquor Liability Insurance (if alcohol is part of services provided)

====================================================================================================

Submit your application and accompanying paperwork to the following:

**For River Campus/MAG/Eastman Campus:**
Peter Castronovo
Senior Sanitarian
Environmental Health & Safety
685 Mount Hope Ave, Box 278878
Phone: 275-8405
Fax: 274-0001
pcastronovo@safety.rochester.edu

**For Medical Center (SMH, Medical School, HWH, etc.):**
Jillian Lynch
Events Coordinator
Institute for Innovative Educ
Room 2-7525, Box 709
Phone: 273-1747
Fax: 256-2682
Jillian_Lynch@urmc.rochester.edu

Catering Waiver Request has been: ( ) Approved    ( ) Denied

Conditions for Approval or Reason for Denial: ____________________________