

Catering Waiver/Agreement & Environmental Health and Safety Permit Application

Please fill out and email copying both cateringwaivers@sdsu.edu AND ehsfoodsafety@sdsu.edu

Event Date: _____ Start time: _____ End Time: _____ Guest Count: _____

Name of Coordinator: _____ Dept/Org: _____

Phone Number: _____ Email: _____

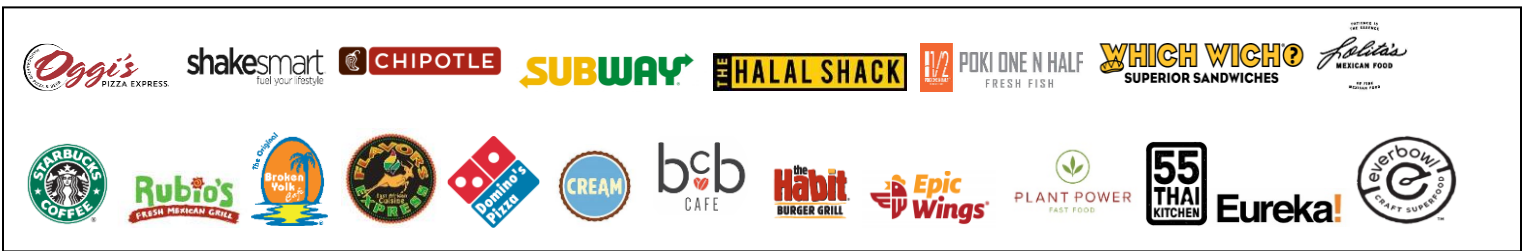
Event Location: _____ Event Name: _____ EAS#: _____

Event Description: _____

Event Type: Private (members only; by invitation) Public (open to anyone on campus) Fundraiser

Where are you getting the food? (Check one)

- SDSU Catering (When Permit is needed) - Please attach contract
- Pre-Approved On Campus Vendor (See Below) - Please attach invoice
- Grocery Store/Costco - Beverages must be Pepsi Products
- Off Campus Vendor - Please attach Invoice - **Insurance Documents Required- Additional Email to Follow**



List of Food Items / How are you serving the food? (Use another page if necessary)

FOOD ITEMS (All Food Items and Beverages)	NAME OF VENDOR	HOW IS FOOD BEING TRANSPORTED? (Pick Up, Drop Off, etc.)	SERVING (Self-serve, Caterer, etc.)	COOKING DEVICE (If applicable)	HOT &/or COLD HOLDING DEVICE

Describe delivery, on-site food handling, food service, hand washing station, and disposal of waste and wastewater: _____

This is to certify that the information provided is true and correct. I will ensure that I receive training and that other foodhandlers will be trained. Trained foodhandlers will be present at the event and will comply with the SDSU Food Safety requirements enforced by the Environmental Health and Safety Department. I understand that non-compliance with the requirements can result in immediate closure, loss of future privileges and disciplinary action. A Copy of San Diego County Health Permit and /or latest inspection report may be required with this application.

Event Coordinator: _____ Date: _____

SDSU CATERING USE

Date Received: _____ Complete Incomplete

Approved By: _____ Date: _____

EHS USE ONLY

Permit Issued: _____ Incomplete Submission: _____ Not Required: _____

EHS Signature: _____ Date: _____