INSURANCE AND INDEMNIFICATION STATEMENT  
(For Caterers providing services to Villanova University on Campus)

INSURANCE REQUIREMENTS:

__________ [Printed Legal Name of Caterer] (“Caterer”) shall provide a Certificate of Insurance to Villanova University’s Insurance and Risk Management Department prior to the commencement of any work or service to Villanova University (“Villanova”). The certificate holder on the Certificate of Insurance shall be listed as Villanova University, Attn: Insurance and Risk Management, 800 Lancaster Avenue, Villanova, PA 19085. Please note the certificate must include Villanova University as an “additional insured” under the Comprehensive General Liability and Automobile Liability policies, and must provide the minimum limits set forth below. The certificate should also indicate whether the General Liability policy is written on a “claims made” or “occurrence” basis. In addition, the certificate must indicate that it is the responsibility of the insurance carrier to provide Villanova with 30 days’ notice prior to cancellation or expiration of the insured’s policy (ies). Insurance requirements follow:

- **Comprehensive General Liability:** $1,000,000 each occurrence
- **Liquor Liability:** $1,000,000 each occurrence *(Only required if alcohol is being served.)*
- **Automobile Liability:** $1,000,000 each occurrence
- **Workers Compensation:** Statutory *(Required by Law)*
- **Employers Liability:** $100,000/500,000/100,000 *(Required by Law)*

**If Caterer is a sole proprietor or otherwise not required by law to carry workers compensation/ employers liability, these requirements are waived. I and Caterer certify that in lieu of workers compensation/ employers liability, I have health insurance to cover myself, and anyone I hire to provide services to Villanova on my or Caterer’s behalf, to meet any and all needs for payment of medical costs for any injuries occurring arising out of the work, services, and/ or products Caterer is providing or on Villanova’s premises. Caterer acknowledges Villanova will not be responsible for any medical expenses incurred as a result of or in conjunction with the work, services, and/ or products Caterer is providing or on Villanova's premises.**

Please initial here if Caterer is not required to carry workers compensation/ employers liability and attests to the above: ____

Note: The above insurance requirements apply to Caterer, as well as all subcontractors hired by the Caterer to provide services and/or products at Villanova.

INDEMNIFICATION STATEMENT:

In consideration of Caterer providing services to Villanova, Caterer hereby agrees to indemnify and hold harmless Villanova University, its agents, servants, students and employees from and against any and all loss, damage, liability or expense, including attorney’s fees, including but not limited to all claims for damages on account of or by reason of bodily injury, including death, which may be sustained or claimed to be sustained by any person, and all damages to property, caused by or arising out of or claimed to have been caused by or to have arisen out of the work, services or products provided by Caterer, or while on Villanova’s premises.

Caterer understands that Villanova will not be responsible for any physical damage occurring to property owned or used by Caterer.

If Caterer will be serving alcohol to Villanova, a liquor license/ permit may be required. Caterer shall provide a current copy of its liquor license that will be in effect for the time Caterer will be providing services to Villanova. If Caterer does not have a liquor license, Caterer must advise Villanova that Caterer does not have a liquor license at least 30 days prior to providing services and/ or products to Villanova.

Caterer agrees that all food will be prepared in a licensed and inspected kitchen, in accordance with state and county health rules and regulations. Caterer agrees that all employees and agents serving food to Villanova on Caterer’s behalf are Serve-Safe State Certified Food Handlers.

I have the authority to bind Caterer to this Insurance and Indemnification Statement.

Signature of Authorized Representative of Caterer  
(Please sign in ink. Typed signatures are not acceptable.)  
Date

Printed Name of Authorized Representative of Caterer  
Printed Title of Authorized Representative of Caterer

Rev. Jan. 2018