



**VILLANOVA UNIVERSITY  
INSURANCE AND INDEMNIFICATION STATEMENT  
(For Catering Organizations providing services to Villanova University)**

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***INSURANCE REQUIREMENTS:***

A Certificate of Insurance evidencing Organization's insurance coverage must be received by Villanova University's Insurance and Risk Management Department prior to the commencement of any work or service to Villanova University. **Please note the certificate must include Villanova University as an "additional insured" under the Comprehensive General Liability, Automobile Liability and Excess 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 University with 30 days notice prior to cancellation or expiration of the insured's policy. Insurance requirements follow:

Comprehensive General Liability: \$1,000,000 each occurrence\*

Automobile Liability: \$1,000,000 each occurrence\* (If applicable)

\* *The General and Automobile Liability limits can be made by means of Umbrella or Excess Liability*

Workers Compensation: Statutory (Required by Law)

Employers Liability: \$100,000/500,000/100,000

Liquor Liability: \$1,000,000 each occurrence\*\* (Only Required if Alcohol will be served)

\*\*Please note if Liquor Liability coverage exists under General Liability policy, this must be noted on the Certificate of Insurance.

*Note: The above insurance requirements apply to the Organization providing services or products to Villanova University, as well as all subcontractors hired by the Organization to provide services or products to Villanova University.*

If I am a sole proprietor, I and my Organization certify that in lieu of workers compensation, I have health insurance to cover myself, and anyone I hire to provide services to Villanova University on my or my Organization's behalf, to meet any and all needs for payment of medical costs for any injuries occurring on campus or arising out of the services or products the Organization is providing. I acknowledge Villanova University will not be responsible for any medical expenses incurred as a result of or in conjunction with the services or products the Organization is providing.

***INDEMNIFICATION STATEMENT:***

In consideration of my providing services to Villanova University, I and my Organization hereby agree 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 services or products provided by me or my Organization.

I understand that Villanova University will not be responsible for any physical damage occurring to property owned by me or my Organization.

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

I have the authority to bind the Organization to this Indemnification Statement.

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Signature of Authorized Representative of Organization

\_\_\_\_\_  
Date

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Legal Name of Organization