

Metz Culinary Management Services

First Right of Refusal Waiver Request

Contact Information

Contact Coordinator: _____

Advisor: _____

Organization/Department: _____

Phone: _____ Fax: _____

Email: _____

Quote Order Number: _____

Date & Time of Initial Catering Request: _____

Event Information

Event Date: _____ Event Location: _____

Event Title: _____ Number of Guests: _____

Event Start Time: _____ Event End Time: _____

Explain the reason for desiring a source other than Metz Catering at FAMU and the proposed menu:

Please submit the following documents/information along with this request form for on campus events, to Florida A&M University's Catering Office at least 7 business days prior to the event if there will be less than 150 guests and 14 business days prior to the event if there will be more than 150 guests.

- Provide Vendor's Certificate of Liability Insurance for \$1,000,000 naming Florida A&M University, FAMU Board of Trustees and its governing bodies as additionally insured.
- Provide a copy of the Vendor's Occupational License, Health Department Certificate and Contact Information.
- Please reference order number from the Metz Catering at FAMU quote.
- Additional University policies and regulations are applicable.

No food preparation is allowed on site. No waiver requests will be considered on or after the event date. This form must be signed and submitted to the Catering Office located in the Student Service Center, in person, by fax at (850) 412-7147 or electronically at ma4017catering@metzcorp.com with a copy to the Office of Business and Auxiliary Services at (850) 561-2547 (fax). If approved, the requestor must contact the University Risk Manager at (850) 599-3453 for additional requirements.

APPROVED _____ DISAPPROVED _____

REASON FOR DISAPPROVAL: _____