

Newport Beach Catering Application

Catering Company Name: _____

Address: _____ City/Zip Code: _____

Main Contact (Name and Title): _____

Main Contact Telephone: _____ Fax: _____

E-Mail Address: _____

Please describe your company's experience in providing catering services:

Provide a detailed description of catering-related services your company provides, including but not limited to: tables, chairs, and other party rental supplies, linens, service equipment, professional staff, entertainment, floral, décor and design, alcoholic beverages, bartenders, etc.:

Are you able to provide the following licensing, permits, and insurance? (Check all that apply):

City of Newport Beach Business License Catering License Health Permit ABC License
 General Liability Insurance (the amount of insurance shall not be less than \$1,000,000 per occurrence of commercial general liability with The City of Newport Beach, its officers, officials, employees and volunteers listed as additionally insured.)

Please provide at least two references for whom your company has performed similar services:

1) Name: _____ Telephone: _____

2) Name: _____ Telephone: _____

***Please provide a menu of your catering offerings. Menus should include recent pricing.**

Signature: _____ Date: _____

Thank you for your interest in offering catering services at our centers. You will be contacted after review of your application. Please call 949-644-3151 if you have any questions.

Return the form to: recreation@newportbeachca.gov



City of Newport Beach FAX: 949-644-3155
Attn: Recreation Services Catering Application
100 Civic Center Drive
Newport Beach, CA 92660