



CATERING APPLICATION

NAME OF FIRM: _____

CONTACT PERSONS: _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

TELEPHONE: _____ **FAX:** _____

I, _____, do hereby request a permit to cater in or on the premises of the NEWNAN CENTRE. I certify that I have obtained a license to do business in the State of Georgia.

I, _____ agree to abide by all requirements prescribed by the NEWNAN CENTRE and the City of Newnan and further agree to make all payments prescribed, including catering fee.

I, _____ agree to use the CATERING QUOTATION FORM in submitting quotations for Newnan Centre functions, and will forward a copy of the quotation form to the Newnan Centre at least 48 hours prior to any function should I be the accepted caterer.

I have enclosed the following items with this application:

- _____ \$ 75.00 Annual Application Fee
- _____ \$ 250.00 Rollover Clean-Up Deposit (Refundable if you choose not to renew)
- _____ Certificate of Insurance (**Naming the Newnan Convention Center Authority and the City of Newnan as additional insureds**)
- _____ Copy of Business License
- _____ Health Department Approval Form (**Or copy of your last health inspection form if not located in Coweta County**)
- _____ Signed Catering Agreement

I understand that if I am issued a permit, I must renew it annually.

SIGNED: _____ **DATE:** _____

FOR OFFICE USE ONLY

Application Approved _____ Not Approved _____

By: _____

Expiration Date: