



Temple Solel requires all approved Caterers to be licensed, insured, and hold a current food service worker license required by Maricopa Health Department. Authorized Caterers are required to provide proof of insurance totaling one million dollars (\$1,000,000).

One month Prior to the Event:

Provide Temple Solel with a Certificate of Liability Insurance with a minimum coverage of \$1,000,000 million including worker's compensation, naming Temple Solel as additional insured.

- Provide a cleaning/damage deposit of \$500. Your cleaning/damage deposit (less damage and expenses) will be refunded only if you: Leave all areas in the condition found upon arrival.

Additional charges will be applied if damage or cleaning exceeds the deposit amount.

Temple Solel's Kitchen is Kosher Style Under Reform Judaism Guidelines: no shellfish or pork products permitted.

Please refrain from using peanut and/or nut products.

Day of the Event:

- Temple Solel is responsible for set up of tables and chairs per diagram provided.
- Temple Solel is not responsible for setting tables with linen and china, cleaning up refuse, dishes, silverware, cups, glassware, or kitchen facilities, or restacking and putting away dishes, silverware, glassware, unwrapping or serving food and drink, etc.
- Temple Solel is not responsible for providing consumable or edible materials, including paper towels, plastic wrap, foil, plastic trash bags, wire twists, coffee, tea, and sweeteners.
- Caterer is responsible for the conduct of his/her employees. Smoking is permitted outside, in the parking lot on the west side of the building where ash trays are available.
- All supplies left on the premises must be removed the day of the event. Temple Solel is not responsible for these items.

Maintenance staff will be on site to assist you with the use of appliances and equipment as needed.

I have read and accept these rules and conditions of the facility use.

Catering Company Name: _____ **Phone:** _____

Name: _____ **Position:** _____ **Phone:** _____

Signature: _____ **Date:** _____



Caterer Check-In & Check-Out List

Date of Event: _____

Event Name: _____

Caterer (Name and Company): _____

Please Initial & Fill In:

Inventory

_____ # of Large Plates Checked-Out
 _____ # of Salad Plates Checked-Out
 _____ # of Dessert Plates Checked-Out
 _____ # of Water Goblets Checked-Out
 _____ # of Wine Glasses Checked-Out
 _____ # of Dinner Forks Checked-Out
 _____ # of Salad Forks Checked-Out
 _____ # of Knives Checked-Out
 _____ # of Tea Spoons Checked-Out
 _____ # of Soup Spoons Checked-Out
 _____ # of Coffee Urns Checked-Out
 _____ # of Coffee Cups Checked-Out
 _____ # of Saucer plates Checked-Out

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 _____ # of Coffee Urns Checked-In
 _____ # of Coffee Cups Checked-In
 _____ # of Saucer plates Checked-In

Caterer please initial _____

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- _____ 1. Social Hall /Meeting Rooms are cleared of all dishes, glassware, silverware and food.
- _____ 2. Linens have been collected and placed in appropriate bags.
- _____ 3. Dishes, glassware, silverware, and coffee urns have been washed, dried and stored in proper receptacles.
- _____ 4. Kitchen has been swept and mopped including the walk-in refrigerator.
- _____ 5. Ovens and stove have been cleaned appropriately.
- _____ 6. Stainless steel work surfaces and countertops have been wiped down and sanitized.
- _____ 7. Sinks have been cleaned and the drain baskets emptied.
- _____ 8. Trash has been properly bagged and taken to the dumpster.
- _____ 9. Any Temple Solel equipment, which has been borrowed, has been returned to the proper place clean, and in good working condition.
- _____ 10. Dishwasher has been emptied and turned off and the filter rinsed.
- _____ 11. Disposal has been run and emptied of debris.
- _____ 12. All excess food has been removed from the walk-in refrigerator and freezer.
 ***Please bring your own plastic wrap and foil for client take home leftovers.
- _____ 13. Utility carts have been cleaned and returned to kitchen area.

To the best of my knowledge, the above duties have been performed and the Temple Solel kitchen has been left in clean and suitable order as it was found upon arrival (*any discrepancies should be noted and initialed by Temple Solel representative*).

Caterer Signature

Date

Time

Temple Solel Coordinator/Custodian

Date

Time

Discrepancies/Comments: _____

Review and submit this form with the Temple Solel Coordinator/Custodian on duty before leaving the building the day of the event. Failure to complete and return this form may affect the return of Caterer's cleaning/damage deposit.