

**Tenant Information:**

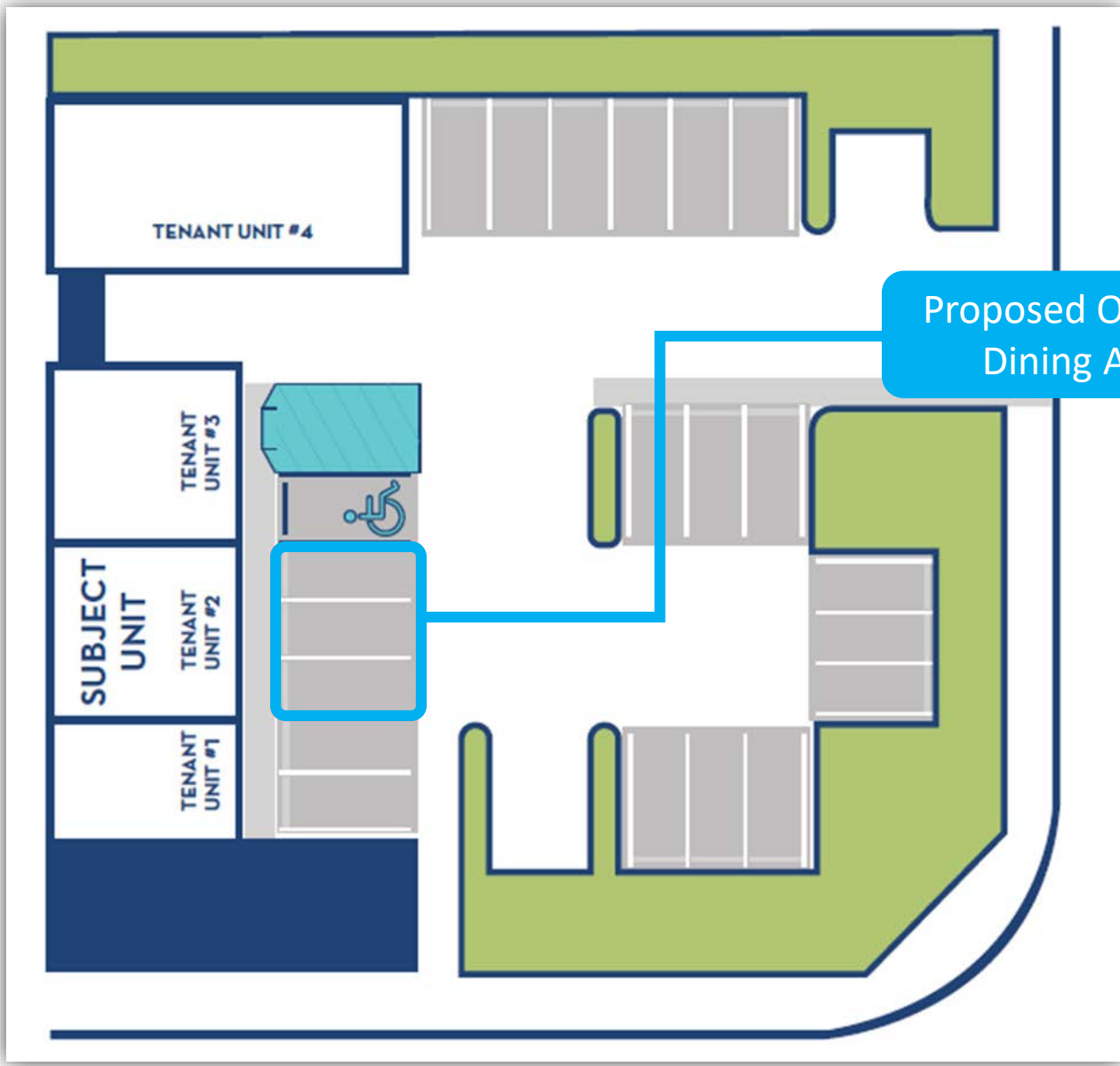
Contact:  
 Phone:  
 Business Name:  
 Address:  
 Unit (If Applicable):

**Outdoor Dining Information**

Area Square Footage:  
 No. of Table(s):  
 No. of Chairs:  
 Covered: Yes or No  
 (attached details)  
 Barrier Types:  
 Hours of operation

PROPOSED OUTDOOR DINING LAYOUT

[EXAMPLE ONLY] OUTDOOR DINING PLAN



Proposed Outdoor Dining Area

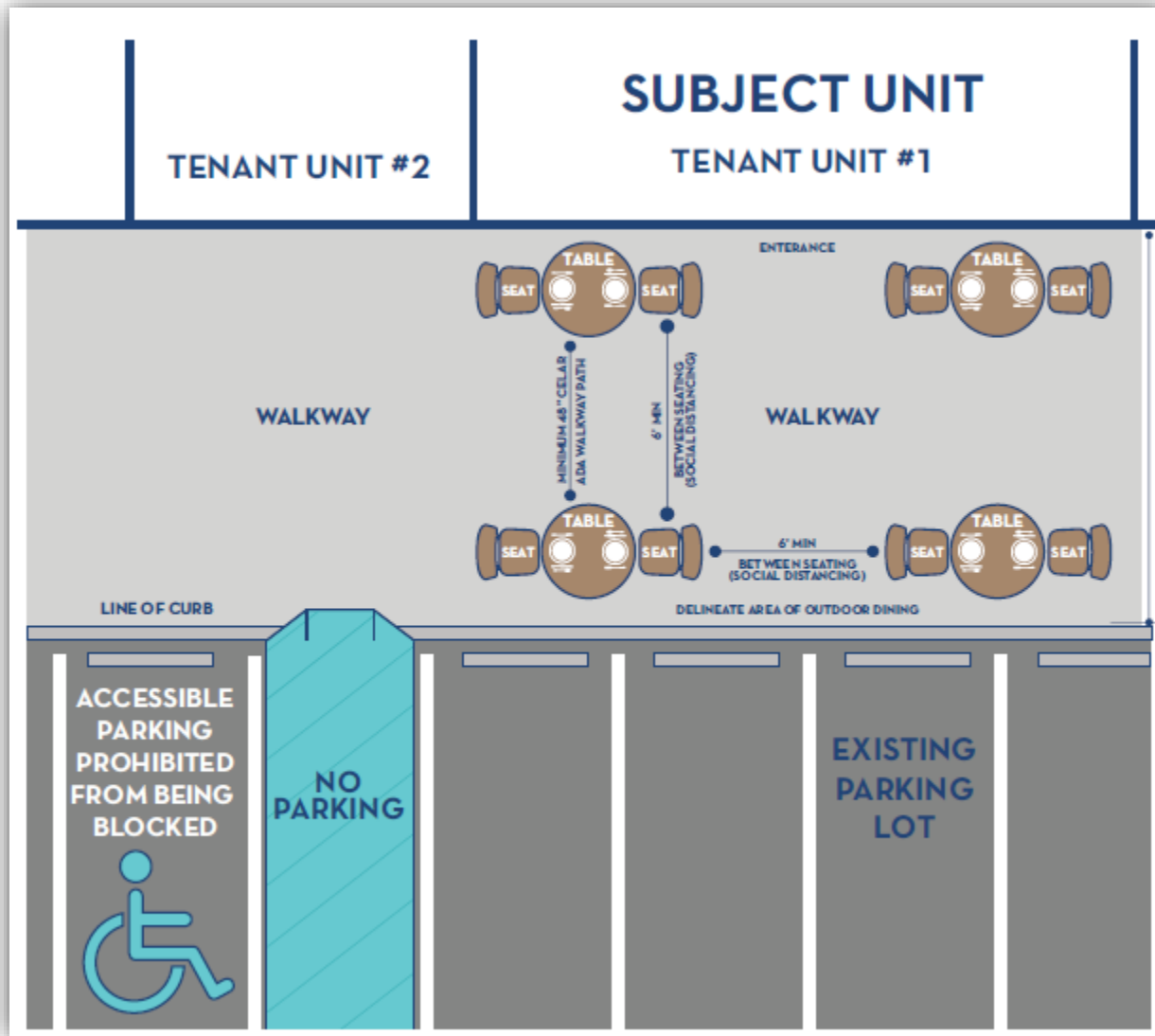
**Tenant Information:**

Contact:  
 Phone:  
 Business Name:  
 Address:  
 Unit (If Applicable):

**Outdoor Dining Information**

Area Square Footage:  
 No. of Table(s):  
 No. of Chairs:  
 Covered: Yes or No  
 (attached details)  
 Barrier Types:  
 Hours of operation

SITE PLAN



**Tenant Information:**

Contact:  
 Phone:  
 Business Name:  
 Address:  
 Unit (If Applicable):

**Outdoor Dining Information**

Area Square Footage:  
 No. of Table(s):  
 No. of Chairs:  
 Covered: Yes or No  
 (attached details)  
 Barrier Types:  
 Hours of operation:

PROPOSED OUTDOOR DINING LAYOUT

[EXAMPLE ONLY] OUTDOOR DINING PLAN (ON WALKWAY)