

Restaurant/ Bar Form

INCOMPLETE

#2

CREATED

PUBLIC
Dec 16th 2019, 4:22:48 am

UPDATED

SOMARA
Dec 16th 2019, 4:34:56 am

IP ADDRESS



27.33.62.177

*** Business Name**

Bygone Beauty's

*** Name of Person Completing Form**

Sarah O'Mara

*** Date of Completion**

2019-06-17

Choose Location**Photo Of Restaurant/ Bar From Door****Photo Of Restaurant/ Bar Other***** Door Swing**

Open

*** Door Width (mm)**

NA

*** Height to top of door handle (mm)**

NA

*** Entry to Room**

Level

*** Number of Steps**

(No response)

*** Check Any That Apply**

Steps can be avoided

*** Stair Width (mm) x Height (mm) x Depth (mm):**

0

*** Right Hand Rail Height (mm)**

(No response)

*** Left Hand Rail Height (mm)**

(No response)

Lift Width x Depth

(No response)

Height of Lift Button

(No response)

Lift Weight Capacity

(No response)

Bar Height (mm)

(No response)

Wheelchair Accessible

Yes

*** Tables**

Yes

*** Clearance Height Under Table 1 (mm)**

750

*** Height to Top of Table 1 (mm)**

770

*** Chairs- Check All That Apply**

Dining Chair Without Armrests

If Other Selected- Describe

(No response)

Height of Dining Chair With Armrests (mm)

(No response)

Height of Dining Chair Without Armrests (mm)

460

Height of Stool (mm)

(No response)

Height of Other (mm)

(No response)

Flooring

Tile

Toilet Access

Yes

Can furniture be re positioned to increase access?

Yes

Describe how furniture can be re positioned

(No response)

Other Comments

Cafe