



TENANT ALTERATIONS REQUEST

Building Name: _____

Building Address: _____

Suite Number: _____

Tenant: _____

Lease Number: _____

Brief Description of Work to be Performed: _____

Estimated Start Date: _____

Completion (approx.): _____

Contractor(s) to be employed: _____

Permission is granted to Tenant to perform the work described above, subject to the attached Construction Rules and Regulations and Tenant Improvement Review Form comments.

Tenant

JBG SMITH Management Services, L.L.C.,

(Enter Tenant Name)

(Enter Building Entity Name)

By: _____
(signature)

By: _____
(signature)

(title)

(title)

(date)

(date)